

Online Gambling Simplified Personal Declaration Form

Notes to Applicants

The Gambling Supervision Commission (GSC) is the sole regulator of all online gambling activities on the Isle of Man. One of its regulatory objectives is to prevent gambling from being a source of crime or disorder, associated with crime or disorder, or used to support crime.

The purpose of obtaining the information in this application forms is to allow the GSC to both fulfil this regulatory objective and consider if the named individual meets the statutory requirements set out in the Online Gambling Regulation Act 2001 (as amended).

To make that decision, the GSC as the regulator for gambling activity on the Isle of Man is implicitly authorised to carry out such enquiries as may reasonably be expected to satisfy itself that these statutory requirements are met. These enquiries may inform the GSC of pending prosecutions, investigations, barring or disqualification by a professional body or industry regulators. If you would like to discuss this, please contact the GSC.

The GSC has produced guidance information to assist individuals, and these are available on our website www.isleofmangsc.com/gambling

Answer all questions in full and where specific information is requested, provide in full. Failure to do so may result in your application being delayed, and your application being returned.

Completed application forms with all necessary supporting documents should be delivered to us at the address below. We are also happy to receive in addition to the posted application, a digital copy by email.

IMPORTANT NOTE

Should it be found that any information provided as part of the application process is, without reasonable excuse, misrepresented or falsified, deliberately omitted or otherwise not properly provided, this may provide reason for an application to be rejected or fail altogether, and any subsequent approval that may have been granted may be suspended or revoked.

More information as to how we use and protect your data can be found in our Privacy Notice. Issued 04/2025

Name of Applicant Company

| Personal Information | | | |
|--------------------------------------------------------------------------------------------------|------------------|----------------|-----------------------|
| Family Name (as shown on your national ID document) | | | |
| Given Forename(s) | | | |
| Other names you have been or are known by | | | |
| Current residential address | | | |
| | | | |
| | | | |
| Length of time at this address | | | |
| If you have lived at your current address for less than 5 y indicating dates of residence there. | ears, please pro | ovide the prev | vious addresses below |
| Date of Birth | | | |
| Place and country of birth | | | |
| Current Nationality | | | |
| Previous or dual nationality held | | | |
| Contact email address | | | |
| Contact telephone number | | | |
| Previous Address 1 | Date | from | Date to |
| | | | |
| | | | |
| Previous Address 2 | Date from | | Date to |
| | | | |
| | | | |
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Verification of Identity and Residence

We are required to verify your identity and your place of residency. Please provide a certified copy of the photograph page of your current valid passport or national ID card and two recent utility bills no more than 3 months old (a bank statement is also acceptable as one of the documents)

Details of the Proposed Role Indicate each position that you hold or will hold within the Applicant Company Senior Manager, accountable for the overall corporate strategy Senior Manager with responsibility for information technology; security of registration and games or betting infrastructure Senior Manager with responsibility for regulatory compliance Senior Manager with responsibility for financial control Senior Manager with responsibility for commercial development Money Laundering Reporting Officer Deputy Money Laundering Reporting Officer AML/CFT Compliance Officer Nominated AML/CFT Officer Other Senior Management role A shareholder of the Applicant Company, Ultimate Parent Company or intermediate companies with a 5% holding or lower A Director of the Ultimate Parent Company of the Applicant Company Investor investing up to or including £250,000 into the applicant company, either directly or indirectly Shareholder with no more than 20% holding of the license holder/license applicant via a **PLC** A stakeholder in the Applicant Company who makes a critical non-financial contribution

Integrity Assessment - Criminal Convictions

IMPORTANT NOTICE

Paragraph 3 of Part 3 of Schedule 1 of the Rehabilitation of Offenders Act 2001 (Exceptions) Order 2018 exempts any occupation in respect of which an application to the GSC a license, certificate or registration is required. You must therefore disclose spent convictions.

In relation to any global jurisdiction, have you:

| ever been investigated, prosecuted or convicted of an offence by a law enforcement agency? | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| ever been issued a formal caution from a law enforcement agency? | |
| had any business involvement or association with a business that formed part of or was in any way involved in a police investigation or an investigation conducted by any other enforcement body? | |
| any reason to believe you may be subject to a pending prosecution? | |

Competency Assessment

As part of our assessment into your competency to carry out the role, please answer the following questions. You will also be required to provide your personal curriculum vitae.

| Have you ever been party to an application to the Isle of Man Government for any type of Gaming, Betting or Gambling License? | |
|-------------------------------------------------------------------------------------------------------------------------------|--|
| If you answer yes, please state which company/s. | |
| Have you ever been party to an application in any other jurisdiction for any type of Gaming, Betting or Gambling License? | |
| If you answer yes, please state in which jurisdiction/s | |

| Integrity Assessment - Financial & Regulatory Circumstances | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| In relation to any global jurisdiction, as an individual, member of a partnership, or owner, director corporation: | r or officer (|
| been declared bankrupt or filed a petition for any type of bankruptcy, insolvency or liquidation under any bankruptcy, insolvency law? | |
| entered into an agreement with creditors? | |
| been subject to a penalty or enforcement action by any Government Agency? | |
| been subject of an Individual Voluntary Agreement (IVA)? | |
| been subject of any civil legal action (including County Court judgements)? | |
| been subject to penalty or enforcement action by any Government Agency? | |
| been subject to any kind of regulatory administration or monitoring? | |
| been unable to satisfy any debt adjudged due and payable, as a judgement-debtor, under an order of the court, in the Isle of Man or any other jurisdiction? | |
| been associated with a business entity when it went into liquidation, receivership or was placed under some form of governmental administration or monitoring and subject to a winding up order? | |
| been involved, or are you currently involved, as a party (i.e. not as counsel or as a witness), in any litigation or are you aware of any pending involvement in litigation if not in usual course of business? | |
| have any reason to believe you may be subject to any pending regulatory action either on the Isle of Man or in any other jurisdiction? | |
| have you ever been censured, discipled or criticised or barred entry by any professional body or trade association or by a Court of Law or by any officially appointed enquiry? | |
| ever been dismissed from any office or employment or barred from entry to any profession or occupation? | |
| have you ever been suspended from any office, or asked to resign? | |
| have you ever been issued with any form of regulatory sanction, including for example, warning notice, direction, disqualification or prohibition? | |
| been unable to satisfy any debt adjudged due and payable, as a judgement-debtor, under an order of the court, in the Isle of Man or any other jurisdiction? | |
| Are you personally in default or arrears with any of the following: | |
| Personal mortgage facility? | |
| Personal loan agreement? | |
| Personal credit or store cards? | |
| Personal bank overdraft facility? | |
| Any other type of personal financial liability? | |

| Checklist | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------|--|--|--|
| Have you: | | | | | |
| provided a certified copy of your identification document? | | | | | |
| provided a certified copy of your proof of ad | dress dated within the previous 3 months? | | | | |
| provided your personal Curriculum Vitae that is accurate and up to date? | | | | | |
| provided certified copies of your relevant pro | | | | | |
| Applicant Company's Declaration | n | | | | |
| I confirm that the Applicant Company has carried out appropriate due diligence investigations into the named individual, which I have seen, reviewed, and subsequently confirm as being satisfactory. | | | | | |
| I am content that the individual named in this form is a person of integrity and to carry out the role they propose to hold within the Company applying for a gambling licence with the GSC. | | | | | |
| Applicant's Full Name | | | | | |
| Director's Full Name | | | | | |
| Director's Signature | | | | | |
| Date of Signature | | | | | |
| Declaration and Signature | | | | | |
| | d correct to the best of my knowledge and understand constitute a criminal offence under Section 4 of the | • | | | |
| I will inform the GSC about any other significant after submitting the application. | cant information and changes that are relevant and b | ecome apparent | | | |
| I confirm that I have read and understood the | ne following information: | | | | |
| The guidance notes for making the a | pplication | | | | |
| The Online Gambling Regulations Act 2001 | | | | | |
| The Integrity Guidance for OGRA applications | | | | | |
| IMPORTANT NOTE Should it be found that any information provided as part of the application process is, without reasonable excuse, misrepresented or falsified, deliberately omitted or otherwise not properly provided, this may provide reason for an application to be rejected or fail altogether, and any subsequent approval that may have been granted may be suspended or revoked. | | | | | |
| Signed | | | | | |
| Name | | | | | |
| Date | | | | | |
| | | | | | |