



PERSONAL DECLARATION FORM

Notes to Applicants

This form should be completed by an individual seeking to be perform a controlled role or function with the applicant company that holds a Bookmaker's Permit issued by the GSC in accordance with the Gaming, Betting and Lotteries Act 1988 (GBL).

This form should be completed in conjunction with the GSC's Integrity Guidance.

In order 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.

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.

Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found. Please number, date and sign any additional attached pages to the application form.

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 licence, certificate or registration is required. You must therefore disclose spent convictions.

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.



Details of the position of the role

Name of the company applying for a Bookmaker's Permit	
Position you hold within the company (tick all that apply)	
Company Director	
Designated Official	
Shareholder	
MLRO	
AML/CFT	

Personal Information

Gender	Male	Female
Surname (Family name)		
Given Forename(s)		
Current residential address & time you have lived here.		
Date of Birth (Day/Month /Year)		
Current Nationality:		
Place and country of birth:		
Contact telephone number		
E-mail address		
If you have a maiden or any former name(s), aliases or common uses (if applicable), please provide an explanation for any former names (e.g. marriage, adoption, etc.)		
If you have changed nationality from your birthright, provide your original nationality and when your nationality changed. Leave blank if not applicable		
If you have lived at your current home address for less than five years, provide all previous addresses during the past five years below. If there is insufficient room, continue on a separate sheet.		
Previous Address 1	Date from	Date to
Previous Address 2	Date from	Date to

Evidence of Identity

We are required to verify your identity. Please provide the details of your current valid passport or national ID card and a certified copy of that document that has been certified as a true copy of the original document by a notary public

Passport Number		Issuing country		Expiry date	
Travel document number		Issuing country		Expiry date	
National ID card Number		Issuing country		Expiry date	

Verification of Address

You must provide a certified copy of one of the following documents as an acceptable form of address verification. The document must clearly show your name, the address in full and not be more than three months old

Utility Bill	
Government Issued document showing your residential address	

Criminal Convictions

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 licence, certificate or registration is required. You must therefore disclose spent convictions.

The GSC will make certain enquiries with third party agencies during the consideration process which may inform us of pending prosecutions.

If you would like to explain the background to any conviction, please do this on a separate document. You must include all spent convictions.

Have you ever been convicted of an offence or been issued a formal caution from any law enforcement agency in any jurisdiction?	
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Financial Circumstances

The following questions refer to all jurisdictions and countries and your answers should not be restricted to any one jurisdiction in isolation. You must declare all matters irrespective of how long ago or in which jurisdiction they occurred. Indicate Yes or No

Have you ever been:

Declared bankrupt?

Entered into an agreement with creditors?

Subject of an Individual Voluntary Agreement (IVA)?

Subject of any civil legal action (including County Court judgements)?

Subject to penalty or enforcement action by any other Government Agency?
(Tax, IRS, Social Security etc.)

Have you ever been party to an application to the Isle of Man Government for any type of Gaming, Betting or Gambling Licence, whether online or terrestrial

Have you ever been party to an application in any other jurisdiction for any type of Gaming, Betting or Gambling Licence, whether online or terrestrial

Have you ever held a Directorship or other senior appointment with any company, partnership or business entity which has been placed into:

Liquidation

Receivership

Insolvency

Any kind of regulatory administration or monitoring

Are you in default or arrears in any of the following:

Mortgage facility

Loan agreement

Credit or Store Cards

Bank overdraft facility

Penalty or enforcement action by any Government Agency (e.g. Income Tax)

Any other type of financial liability

Checklist

Please indicate that you have provided the following information. If the answer is NO, please explain on a separate sheet of paper.

Answered all questions or provided an alternative explanation	
Provided a certified copy of your evidence of identity	
Provided a certified copy of your verification of address	
Details of relevant qualifications for the post you hold	
Signed and dated the declaration below	
Provided a Curriculum Vitae showing your full employment history, including employers name, job title and responsibilities, the length of the term of employment and the reason for leaving.	

Declaration and Signature

As part of the submission by the Applicant Company under the Gaming, Betting and Lotteries Act 1988, as an individual who holds or is applying to hold the role indicated on this form in connection with a Bookmaker's Permit, by signing this declaration:

- I declare that the information supplied in this application is correct to the best of my knowledge.
- I will provide the GSC with any further information that it may require when considering this application.
- I will inform the GSC of any other information and changes after submission of the application which is material to this application.
- I understand that the GSC will make enquiries, during the application process and on a continuing basis.
- I confirm that we have read and understood the:
 - The Gaming, Betting and Lotteries Act 1988.
 - The Guidance on Integrity Controls.

Signed

Full Name

Date of signature

Isle of Man Director's Statement

I confirm that the appropriate due diligence investigations have been completed by the applicant company.

Accordingly, I confirm that I am satisfied that the individual named on this form is a person of integrity.

Applicant's Full Name

Director's Full Name

Director's Signature

Date

