

## PERSONAL MANAGEMENT LICENCE APPLICATION RENEWAL FORM

(Section 93B of Gambling Regulatory Authority Act 2007)

Licence Renewal			
S/N		PERSONAL DETAILS	
1.			
1.1	Title		
1.2	First Name		
1.3	Last Name		
1.4	Residential Address		
1.5	Occupational Address		
Plea	se note that all future	correspondences will be sent to you to the address mentioned in part 1.5	
1.6	National ID Card Number		
1.7	Passport Number		
1.8	Email Address		
1.9	Mobile Phone		
1.10			
1.11			
1.12	Nationality		
2.		PERSONAL MANAGEMENT DETAILS	
2.1	PML no		
2.2	PIN		
2.3	Validity Period		
3.		ORGANISATION DETAILS	
3.1	Licencee Name		
3.2	Type of licence		
3.3	Validity of licence		
3.4	Place of Operation		



4.	DETAILS OF EMPLOYMENT		
Please provide details of your employment (paid or unpaid) history within the last 10 years			
indication whether the employment was related to the gambling industry including Horse			
Racing	Racing.		
4.1	Employer Name:		
	Job Title:		
	Main Responsibilities:		
	Gambling sector: Yes/No		
4.2	Employer Name:		
	Job Title:		
	Main Responsibilities:		
	Gambling sector: Yes/No		

5.	EXPERIENCE	
Please provide details of experience related to the application being applied for.		
5.1	Name of Organization:	
	Start Date:	
	End Date:	
	Details of Work:	
<b>5.2</b>	Name of Organization:	
	Start Date:	
	End Date:	
	Details of Work:	



6.	CONVICTIONS OR INVESTIGATIONS OR COURT PROCEEDINGS			
6 <b>A</b>	All current and previous convictions, investigations or court proceedings must be			
	declared			
	Have you personally or as a representative of any Body Corporate ever been			
	convicted of any offence in Mauritius or abroad or have you been involved or			
	subject to any sort of investigation by any investigatory body or Law Enforcement			
	Agency or Authority in Mauritius or abroad or have you ever been subject to any			
	court proceedings of whatever nature in Mauritius or abroad or have you ever			
	accepted a formal police reprimand, warning, caution in Mauritius or abroad			
	including if charged with an offence under any enactment but awaiting trial, or			
	under investigation? Yes/No (if yes please fill section 6A.1 and 6A.2)			
6A.1	Date:			
	Offence:			
	Authority:			
	Details:			
6A.2	Date:			
	Offence:			
	Authority:			
	Details:			
<b>6B</b>	Have you ever had any civil legal action taken against you personally or as a			
	representative of a body corporate? Yes/No (if yes please fill section 6B.1 and 6B.2)			
6B.1	Date:			
	Nature of Civil Legal Action:			
	Court:			
	Outcome:			
	Details:			
6B.1	Date:			
1	Nature of Civil Legal Action:			



	Court:
	Outcome:
	Details:
6C	Are you subject to any current or pending or previous process, investigation, or
	proceedings by any Statutory, Regulatory or Governing Body or any other Law
	Enforcement Agency or Authority (including Mauritius Police Force, Mauritius
	Revenue Authority, Independent Commission Against Corruption, Financial
	Intelligence Unit, Financial Reporting Council, Registrar of Companies, Registrar
	of Association, Conservator of Mortgages)? Yes/No (if yes please fill section 6C.1 and
(0.1	6C.2)
6C.1	Date:
	Subject of Investigation:
	Authority in charge of Investigation:
	Details:
6C.2	Date:
00.2	Subject of Investigation:
	Authority in charge of Investigation:
	Details:
	Details.
7.	FINANCIAL INFORMATION
	you ever had any liquidity problem or ever been declared bankrupt under the
	ruptcy Act or Insolvency Act or have you ever been the subject to any bankruptcy
•	edings or insolvency proceedings? Yes/No (if yes please fill section 7.1 and 7.2)
7.1	Date:
	Details:
7.2	Date:
7.4	Duc.



	Details:		
7.3	Process, Investigation or Proceedings under Customs or Revenue Law		
	ther you are actually or previously have been the subject of any process, investigation		
	oceedings under Customs or Revenue Law? Yes/No (if yes please fill section 7.3.1 and		
7.3.2			
7.3.1	Date:		
	Details:		
7.3.2	Date:		
7.3.3	Details:		
7.4	Additional Information on Fitness and Propriety		
	Please provide any sort of information in your possession which will have a bearing directly or indirectly on your fitness and propriety.		
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7.4.1			
7.4.1	Date:		
7.4.1			
7.4.1	Date:		
7.4.1	Date:		
7.4.1	Date:		
	Date: Details:		
8.	Date: Details:  DECLARATION OF INTEREST		
8. <b>Are y</b>	Date: Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company		
8. Are y abroa	Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in		
8. Are y abroathe ac	Details:  Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)		
8. Are y abroa	Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in		
8. Are y abroathe ac	Details:  Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)  Company Name:		
8. Are y abroathe ac	Details:  Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)		
8. Are y abroathe ac	Details:  Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)  Company Name:		
8. Are y abroathe ac 8.1	Details:  Details:  DecLARATION OF INTEREST  rou an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)  Company Name:  Date Appointed:		
8. Are y abroathe ac	Details:  Details:  Details:  DECLARATION OF INTEREST  You an office bearer including a nominee director in any local company or a company and or are you a party to any joint venture or any Société having a direct or interest in activities covered by your licence? Yes/No (if yes please fill section 8.1 and 8.2 and 8.3)  Company Name:		



8.3	Name of Société/Joint Venture:	
Name of Associates or Members:		
	Nature of their share or interest in the Joint Venture or Société:	
8.4	Source of fund (applicable for trainers and applicant for horse ownership):	
9.	DOCUMENTS TO BE PRODUCED	
Prov	ide an original and a copy of the following documents to as part of the KYC process	
9.1	National ID Card or Valid Passport with clear photographic image	
9.2	Proof of Address dating not later than 3 months	
9.3	Certificate of character issued not earlier than 3 months from the date of the application	
9.4	Bank Reference from a recognized banking institution stating whether the account has been maintained satisfactorily (Bank reference must not be dated more than 6 months old)	
9.5	Two (2) passport sized photograph	

10.	UNDERTAKING FROM THE APPLICANT
′ (	Jame)
I also fully understand that all the information and declarations submitted in this application form are not exhaustive and limited, and that this application form is subject to the statutory requirement of s95 of the GRA Act where I may be required from the Authority to furnish sucl further information that it may deem fit from me in order to properly determine whether I am a fit and proper person and to properly consider my application.	



## Authorised Signature Date

11.	FOR OFFICE USE			
	Please tick where appropriate	YES	NO	
11.1	Approved			
11.2	Additional Comments:			
11.3	Responsible Officer Name:			
	D			
	Responsible Officer Signature:			
	Date Processed:			

Please forward your completed application with the documents mentioned in part 8 of the application form.

The Chief Executive Gambling Regulatory Authority Level 12, Newton Tower Sir William Newton Street PORT LOUIS

\*Please refer to the regulations governing the Personal Management Licence available on our website http://gra.govmu.org/