

REQUEST FOR EQUESTRIAN CENTRE INSPECTION

NAME OF CENTRE:
RESPONSIBLE PERSON:

1. To be filled by Responsible Person

Request submitted by: Mr/Mrs/Miss

Surname: _____

Name: _____

National ID/ Passport No: _____

Address: _____

GPS Co-ordinates _____

Phone Number: _____

Email Address: _____

Days and times that an inspections can be done:

DAY	AM	PM

Contact number and name of person on site:

Gambling Regulatory Authority

Level 12, Newton Tower, Sir William Newton Street, Port Louis, Mauritius | Tel: +230 260 2000 |
Fax: +230 213 1205 | Email: hrid@gra.mu | Website: <http://gra.govmu.org/>

Required documentation to be submitted on application of an Equestrian Centre License as per the GRA License application process:

(i) Proof of Ownership/ Lease agreement

(ii) Plan of Equestrian centre (including: Perimeter fence, no. of boxes, paddocks, sand pits, tracks, security measures)

(iii) Relevant authorisations from Local Government, Ministry of Environment and Ministry of Agro Industry, Food Security, Blue Economy and Fisheries

Office use only

Received by GRA on:
Approved by: <i>(Stipendiary Steward/ Regulatory Veterinarian)</i>
Signature: _____ Date: _____