Board Reference No.



CLAIM FOR REFUND OF OVERPAID BETTING TAX

In accordance with the rules made by the Board in terms of Section 7 of the KwaZulu-Natal Gaming and Betting Act, No. 08 of 2010, the following form must be completed by a licensee for the claiming of a refund in respect of overpaid betting tax.

Тур	e of Sector	Bookn	naki	ng				Totalisator	
Na	me of Applicant								
Add	dress								
Co	ntact Number						Email Address		
Rig	ht Number								
	ails of Reason/								
Motivation for the claiming of refund in respect of overpaid betting tax									
bei	Ting tax								
Sig	nature of Applicant						Date of Application		
Che	ecklist in respect of suppor	rting doc	cume	entation	or ir	nformation	which must accompany t	he Claim Form:	√
1	_	for the claim for refund of overpaid betting tax							
2		he amount of the refund							
3 Substantiating documentation which may prove the licensee's claim If you require additional space kindly use blank standard A4-size paper and attach it to the application form. Please ensure that you clearly							label the		
additional information provided. Disclaimer: The list of documents specified to accompany these forms is not exhaustive. The Board does not waive any right it has, as set out in the								n the Act.	
to call for further information or documentation. An applicant may include any additional information of documentation it deems necessary to supplication.									
						For (Official Use		
_	nature of Board ployee / Recipient				_		Date of Receipt of Application		
Approved		Yes		No			Board Resolution No.		