

APPLICATION FOR REGISTRATION AS AN EMPLOYEE: CASINO SERVICE OR MANUFACTURING

NAME OF THE LICENSEE WHO EMPLOYS THE APPLICANT: _



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PART 1: INSTRUCTIONS AND GENERAL INFORMATION

1.1 Application

- 1.1.1 Kindly read the following instructions and this application form carefully before completing it. Any incomplete, inaccurate or misleading answers or information may result in the application being rejected and returned to the applicant. No modifications to the pre-printed questions or information contained in this form are permitted.
- 1.1.2 The application fee in terms of Schedule 2 of the Act is non-refundable for returned applications.
- 1.1.3 The purpose of this application form and the information and documentation requested herein, is to serve as a basis for a probity investigation which will be conducted by the KwaZulu-Natal Gaming and Betting Board. The purpose of a probity investigation is to verify all information and documentation supplied by the applicant and to discover facts which may assist the Board to formulate an opinion as to the suitability, or otherwise, of the applicant.
- 1.1.4 This application must be completed by any person, as required by the Board, who is a casino, service or manufacturing employee.

1.2 Disqualification

- 1.2.1 Section 32, read with section 67 of the KwaZulu-Natal Gaming and Betting Act, 2010 (Act No. 8 of 2010) lays down various circumstances that disqualify a person, including a juristic person, from being granted a licence or from being granted a certificate of registration. An applicant may, if he or she is able to do so, rectify the disqualification.
- 1.2.2 Before completing the application form, please refer to sections 32 and 67 of the KwaZulu-Natal Gaming and Betting Act, 2010 (Act No. 8 of 2010). Copies of the Act aforesaid and the Regulations are available at www.kzngbb.org.za.

1.3 General Instructions

- 1.3.1 All entries on the application form, except signatures, must kindly be made in black ink and in block letters.
- 1.3.2 The Board will not consider the application until all the information in an application is completed in full.
- 1.3.3 Should anything stated in the application change after it has been lodged with the Board, prior to the application being considered and prior to the Board's written decision being made, the applicant must immediately notify the Board in writing of such changes and of the effect thereof on the application.
- 1.3.4 If a question does not apply, kindly write "Not Applicable" ("N/A") in the space provided. If there is nothing to disclose about a particular question, write "None" in the space provided. If an alteration is made to an answer, the applicant must sign in full and record the date next to the alteration.
- 1.3.5 If additional space to answer any question(s) is required, kindly use blank standard A4-size paper and attach it to the application. Kindly ensure that:
 - The Part and the number(s) of the question(s) being answered are clearly indicated on the additional pages.
 - Next to the appropriate question on the application form, record the number of the additional page.



- 1.3.6 All supporting documentation and/or attachments must be included after the relevant part of the application form and must be clearly labeled, and the name of the applicant reflected on the top of each page.
- 1.3.7 All amounts recorded on the application forms must be in South African Rands.
- 1.3.8 On completion of the application form:
 - Check that each question has been answered fully and correctly, then initial each page of the application form and any additional pages attached thereto.
 - Using the Application Check List (Part 8), tick listed items to ensure that all the requirements of the application have been fulfilled.
- 1.3.9 An applicant may request the Board, in writing, to withdraw his/her application at any time prior to a final decision being made by the Board in respect of such application.

1.4 Address for Submission of Application

The Chief Executive Officer

The completed application form, together with the application fee and any additional pages must be delivered, either by registered post or by hand, to:

The Chief Executive Officer

The Chief Executive Officer

The Chief Executive Officer

KwaZulu-Natal Gaming & Betting Board KwaZulu-Natal Gaming & Betting Board

Private Bag X9102 Natalia Building

PIETERMARITZBURG 330 Langalibalele (Longmarket) Street

KwaZulu-Natal PIETERMARITZBURG
3200 KwaZulu-Natal

Or

KwaZulu-Natal Gaming & Betting Board KwaZulu-Natal Gaming & Betting Board

3 Nollsworth Crescent P O Box 555
Nollsworth Park Umhlanga Rocks

Nollsworth Park Umhlanga Roci La Lucia Ridge Durban 4320

4300

1.5 Application Fees To Accompany the Application

The applicable non-refundable application fee listed below, should accompany the application. Cheques should be made payable to the KwaZulu-Natal Gaming and Betting Board. In the event of EFT payments, kindly consult the Board for banking details.

Type of Application	Application Fees
Application for registration as a Casino Employee	R 1 140.00
Application for registration as a Service or Manufacturing Employee	R 1 140.00

1.6 Investigation Costs

In terms of the Act, applicants are required to pay a deposit for investigation costs. This amount has been predetermined by the Board in respect of these categories of applications. Kindly consult the Board for details of the applicable amount. No investigation will commence before such investigation costs have been paid, and proof of such payment has been provided to the Board.



			SAMINO & B	ETIING BOARD
PART 2:	APPLICATION DETAILS			
2.1	Please indicate the type of employee reg below:	istratio	n being applied for by inserting $old X$ in the applicat	ole box
Casino			Service or Manufacturing	
2.2	Provide details of the name and address applicant:	ess of	the Licensee/Business who employs or appoir	nts the
		•		_



PART 3: PERSONAL HISTORY DISCLOSURE	: APPLICANT
* Delete whichever is inapplicable Applicant Details	
Surname	
First Name(s)	
Maiden Name	
Title	
Aliases, Nicknames, other name changes, legal or otherwise, you have used or by which you have been known	
Birth and Identity Information	
Date of Birth	
Age in Years	
Place of Birth	
(City/Province/ State and Country) South African Identity Number	
(where applicable)	
Foreign identity number (where applicable)	
	e case of a foreign applicant, provide a copy of Work Permit or
Residence Permit	
Passport Information and Citizenship	
Passport Number	
Country	
Place of Issue	
Date of Issue	
Date of Expiry	
Country/Countries of which you are a Citizen	
,	
Contact Numbers and Electronic Addresses	
Telephone Business	
Telephone Home	
Cell/Mobile	
E-mail Address	
Address Information	
Present Residential Address (In relation to current workplace)	
Present Business Address (Physical)	



List all addresses at which you have been permanently resident over the last five (5) years, beginning with your current address and working backwards:

Period		Street and Number	Suburb	City	Province/ State 8
From	То				Country
Physico	al Descri	ption			
Height					
Scars /	Tattoos				
Other D	Distinguis	hing Marks			
Marital	Status		1		
		Divorced/Widow/Widower			
		se/Partner rital unions or a relationship where you li	ve together in a manner resem	bling a marital union)
Date of	f Marriag	ge / Date of Commencement			
		er (as above arried (if applicable)			
		oouse/Partner			
		's Maiden Name (if applicable)			
		f Spouse/Partner			
		's Occupation			
		dress of Spouse/Partner's			
Employ					
	' Particu				
Full Name of Father					
Father's Date of Birth					
Father's Occupation					
Full Name of Mother					
Full Nar			1		
	's Date o	of Birth			

Full Names	Relationship	Age	Identity Number	Occupation



Acade	Academic Information						
Highe	st Class of School Edu	cation Level					
Attain	ed						
Name	and Place of School						
Year C	Completed						
Name	of Last Tertiary Institu	tion Attended					
Profes	sional Qualifications						
Year C	Completed						
Preser	nt Studies						
Name	of Institution/School						
Date o	of Commencement						
3.1	Arrests, Detention o	and Convictions (excluding m	inor traffic offe	ences):			
jail terr from th	n was served, or where	s part is answered correctly and l a case was withdrawn, this should these forms. Non-disclosures are	d be disclosed if	the incident occurred	in the past ten (10) years		
Have	you ever in the past t	ten (10) years, in South Africa	or elsewhere b	peen -			
(a)	Convicted of an of *Yes/No	fence (including a payment	of a fine)?				
(b)	Arrested, detained, charged or summoned before a court to answer for any offence for any reason whatsoever, regardless of the outcome of the event (including the payment of a fine or withdrawal of a case)? *Yes/No						
(c)	If "yes" to either que	estion, provide details below,	listing all cases	without exception:			
Nature	e of Offence	Province/State & Country	City/Town	Date of Offence	Result of Court Case or Hearing		
3.2	Civil Lawsuits and R	Related Matters					
(a)	Civil Lawsuits and Related Matters Have you ever been a party in a civil lawsuit or are you aware of any such action that may be pending? *Yes/No						
/lol	Have you ever had a judgment returned against you?						

3.2	Civil Lawsuits and Related Matters
(a)	Have you ever been a party in a civil lawsuit or are you aware of any such action that may be pending? *Yes/No
(b)	Have you ever had a judgment returned against you? *Yes/No
(c)	Has your salary, wages, earnings or other income ever been subject to garnishee order or attachment? *Yes/No
(d)	Have you ever had any article repossessed by a finance company? *Yes/No
If "ves" t	to any of questions (a) to (d) above, furnish details as an attachment page clearly labeled Part 3.2.

3.3 Social Grants

Are you receiving any social grant from the Government?

If "yes" as an attachment labeled Part 3.3 provide details of the Social Grant and a copy of the latest slip. If the salary is above the threshold determined by the relevant Minister, provide details of the Social Grant, a copy of the latest slip and proof of cancellation issued by South African Social Security Agency (SASSA) or copy of application thereof. Note: It is the responsibility of the applicant to establish the threshold amount applicable at the time the application is made. Failure to disclose may lead to disqualification for non-disclosure thereof.

3.4	3.4 Employment/Business History					
Currer	nt Occup	pation				
Beginr past te	ning with en (10) y	n your current employment, list y rears:	vour employment histor	y, including all businesses with which	h you have been involved and periods of	unemployment for the
Period		Name and Address of	Job Title	Description of Duties	Reason for Leaving	Contact Person
From	То	Employer/Business		(i)		
	l			(1)		
			_			
		1		(ii)		
				(iii)		
				()		
			_			
			-			
	I	1		(iv)		
	l	1		1		



Period		Name and Postal Address of Employer/Business	Job Title	Description of Duties	Reason for Leaving	Contact Person	
	(v)						
			-				
				(vi)			
			-				
				(vii)			
				(*11)			
			-				
			-				
				(vii)			
			1				
			-				
			-				



If "yes"	, complete the follow	ing:				
Date	Name and Address	of Employer	Contact P	erson	Reason for Dism or Resig	issal, Discharge gnation
3.6 Person	al References					
Nominate three	e persons who are no I who may be asked t				for a period prefe	rably during the
Surname	First Name(s)	Address		Occupation	Telephone Number	Years Known
					Number	
	sional/Ethical History					
List present and	d past membership (w	rithin the past fi	ve (5) years	of professional b	odies or organisat	ions:
Body / Organis	ation		Perio	d		

Have you ever been dismissed, discharged or asked to resign from any employment in an office of trust?

3.5

*Yes/No



(a)	misconduct or any other breach of their rules or regulations? *Yes/No
	If "yes", provide details:
(b)	Have you ever been directly involved in the management of any entity that has been placed in
(6)	liquidation, judicial management, a scheme of arrangement, or any other formal administration (including any pending arrangements)? *Yes/No
	If "yes", provide details:
(c)	Have you ever been disqualified from acting as a director of a company under any provision of current or previous South African legislation or legislation of a foreign country? *Yes/No
	If "yes", provide details:
(d)	To your knowledge, are you or have you ever been under investigation by any government and/or licensing authority? *Yes/No
	If "yes", provide details:
(f)	Have you ever been granted a registration certificate as an employee in South African or elsewhere, by any licensing authority within the gambling industry? *Yes/No
	If "yes", provide details:
(g)	Have you ever applied for a registration certificate as an employee in South African or elsewhere, by
	any licensing authority within the gambling industry and withdrawn the application prior to final determination thereon by the government authority concerned? *Yes/No



	If "yes", provide reasons for the withdrawal of the application:
(h)	Have you ever had a registration certificate as an employee in any gaming or betting activity cancelled or suspended or, alternatively, has a licensing authority ever considered cancelling or suspending such registration certificate? *Yes/No
	If "yes", provide details:
(i)	Do you have any application for a registration certificate as an employee to conduct any gaming and/or betting activity awaiting final determination by any licensing authority? *Yes/No
	If "yes", provide details:
3.8	Provide brief details of the position you will be holding in terms of this application:
2.0	Are year engaged a
3.9	Are you currently:
a)	Appointed as a public servant, or are you a member of the South African Police Services or any official law enforcement agency in a gambling jurisdiction outside of the Republic? *Yes/No
(b)	A member of Parliament or any provincial legislature? *Yes/No
(c)	A member of a local authority or any council or board established in terms of the Constitution, including a member of the House of Traditional Leaders? *Yes/No
(d)	An office bearer or employee of any political party or organization? *Yes/No
(e)	If "yes" to any of the questions (a) to (d) above, provide details:
3.10	Is your spouse/ partner in a relationship where you live together in a manner resembling a marital relationship:
(a)	Appointed as a public servant, or a member of the South African Police Services or any official law



	enford *Yes/N	cement agency in a gambling jurisdiction outside of the Republic? No				
(b)	A mer *Yes/N	mber of Parliament or any provincial legislature? No				
(c)		mber of a local authority or any council or board established in terms of the Constitution, including mber of the House of Traditional Leaders? No				
(d)	An off *Yes/N	fice bearer or employee of any political party or organization? No				
(e)	If "yes"	to any of the questions (a) to (d) above, provide details:				
3.11		ou at present, or were you during the preceding twelve months, a member of the KwaZulu-Natal ng and Betting Board, or a member of its staff or an inspector of the Board?				
	If "yes	", provide details:				
3.12	Are you a relative of a member of the KwaZulu-Natal Gaming and Betting Board? *Yes/No					
	If "yes", provide details:					
NOTE: For the purposes of the question above, "relative" has the meaning assigned in the Act, 2010 (Act No. 8 of 2010), which means any of the following, as the case may		e purposes of the question above, "relative" has the meaning assigned in the KwaZulu-Natal Gaming and Betting 210 (Act No. 8 of 2010), which means any of the following, as the case may be:				
	(a)	A husband or a wife, any partner in a customary union according to indigenous law or any partner in a relationship where the parties live together in a manner resembling a marital relationship or a customary union;				
	(b)	Any child born out of any one of the unions referred to in (a) above, or any child born to one of the partners referred to in (a) above;				
	(c)	The parents of a person referred to in (a) and the parents of such person's husband, wife or partner referred to in (a).				
3.13	Have *Yes/N	you ever been involved in illegal gambling in South Africa, or elsewhere in the world? No				
	If "yes"	", provide details (including dates and/or year/s):				



3.14	Credit History						
(a)	Are you currently in default for payment of any debts incurred solely or jointly in your name? *Yes/No						
	If "yes", provide details below:						
Credito	or	Total Amount Owing (Rands)	Total Amount in Default (Rands)	Number of Days Overdue			
(b)	Is any person, including any entity, in responsive agreement? *Yes/No	ect of whom you have	given a guarantee,	in default of any			
	If "yes", provide full particulars:						
(-)	Taxaaa ka aa ka aa ka aa aa aa aa aa aa aa	f					
(c)	To your knowledge, have you ever been refused credit or been the subject of an adverse credit rating? *Yes/No						
	If "yes", provide details:						
3.15	Financial Information						
(a)	Have you ever been declared insolvent or taken advantage of the laws relating to bankruptcy or insolvency? *Yes/No						
	If "yes", provide full particulars:						
(b)	Are you a member of a corporate body the *Yes/No	at is subject to winding-	up or judicial manage	ement?			
	If "yes", provide full particulars:						
_							



PART 4: STATEMENT OF ASSETS AND LIABILITIES

	STATEMENT OF ASSE	TS	
AS AT			
List all assets, movable and immova Enter the amo	ble, tangible or inta ount as at the date o	ngible, on the of this stateme	e appropriate line below. ent.
ASSETS	ORIGINAL COST/INVESTMENT		CURRENT ESTIMATED MARKET VALUE
Cash in Banks	R		R
Accounts Receivables	R		R
Stocks and Bonds	R		R
Interest in any business/es	R		R
Real Estate / Land / Property	R		R
OTHER ASSETS			
Clothing	R		R
Furniture	R		R
Electronic Equipment	R		R
TOTAL ASSETS	R		R
		SIGNATURE:	
		DATE:	



	STATEMENT OF LIA	BILITIES	
AC AT			
A3 A1			
	lina halaw. Fishar tha		
List all liabilities on the appropriate Each listed liability mu	e line below. Enter the ist be described fully	on the appropriate	schedule.
LIABILITIES	ORIGINAL		CURRENT
LIABILITIES	AMOUNT		AARKET VALUE
	74		
Accounts Payable (credit cards etc.)	R	F	t .
Mortgage Payable	R	F	1
Real Estate	R	F	ł
Other Liabilities	R	F	1
TOTAL LIABILITIES	R	F	1
		-	
NET WORTH	R		
NEI WORIII	K		
Where total liabilities exceed total assets (nega		xplanation must be	provided as to the reasons and the
measures taken by the applicant to address this o	deficif.		
		SIGNATURE:	
		DATE:	



PART 5: APPLICANT	S RELEASE AUTHORISATION			
ТО	All courts, probation departments, employers, educational institutions, banks, financial and other institutions, receivers of revenue, all law enforcement agencies, other regulatory bodies — national, provincial and local - without exception, both foreign and domestic and to whomsoever else this authorisation may be duly presented.			
FROM (Full Name and Surname)				
IDENTITY NUMBER				
of KwaZulu-Natal, South Afr	olvement in an application for registration within the gambling industry of the Province rica, I agree to allow the KwaZulu-Natal Gaming and Betting Board, its consultants, a Services to conduct a full investigation into my background.			
I HEREBY AUTHORISE the Chief Executive Officer of the KwaZulu-Natal Gaming and Betting Board, its consultants, and the South African Police Services or any person duly authorised by an original letter of authority signed by the aforementioned (an authorised delegate) to make such enquiries as they deem necessary, and to have access to, inspect and obtain copies of:				
any credit report, other report, legal or commercial information derived from those reports that has any bearing on my credit worthiness, credit history, credit standing or credit capacity; any loan information, bank account records, safe deposit box records and bank statements pertaining to me; any records relating to investigations of my activities by any domestic or foreign police services, crime investigation agency, corporate regulatory agency, any gambling regulatory body or any revenue collection/regulatory body; any court records relating to any present or past civil or criminal court proceedings to which I am party; and any other document, record of correspondence pertaining to me.				
Board and, its consultants, t by any of them, docum	ED to release to the Chief Executive Officer of the KwaZulu-Natal Gaming and Betting the South African Police Services or an authorised delegate, all information requested entary or otherwise, pertaining to me. This authorisation shall supersede and quest or authorisation to the contrary. A photocopy of this authorisation will be as valid as the original.			
SIGNATURE				
DATE				
PLACE				
NAME OF WITNESS				
SIGNATURE OF WITNESS				



PART 6: DECLARATION THAT INFORMATION SUPPLIED IS TRUE, CORRECT AND COMPLETE					MPLETE	
I,						of
		(Full 1	Name of Decl	arant)		
		(Adı	dress of Declo	arant)		
correct in every						ese forms is true and disclosed.
Signed at				on		
Signature of Dec	larant					
Signature of Witn	ess					
Name of Witness	(Print)					



PAKI	7: AFFIDAVIT BY PERSON MAKING APPLICATION FOR REGISTRATION IN TERMS OF THE RWAZULU- NATAL GAMING AND BETTING ACT, NO. 8 OF 2010				
l,	(the Applicant) do hereby state that:				
	not disqualified, in terms of Section 32 of the KwaZulu-Natal Gaming and Betting Act, from being granted a licence or ation in terms of this Act, in that I:- Am not –				
	(i) a person contemplated in section 8(1) of the Public Service Act, 1994 (Proclamation No. 103 of 1994) or charged with any decision-making or criminal enforcement function pertaining to gambling or the regulation thereof; or				
	(ii) a political office bearer;				
(b)	Am not under the age of 18 years on the date of the application being considered by the Board;				
(c)	Am not an unrehabilitated insolvent or subject to any legal disability;				
(d)	Am not subject to an order of a competent court holding that person to be mentally unfit or deranged;				
(e)	Have never been removed from an office of trust on account of misconduct relating to fraud or the misappropriation of money;				
(f)	Have not been convicted during the previous 10 years, in the Republic or elsewhere, of the offence of theft, fraud, forgery and uttering, perjury, an offence under the Prevention and Combating of Corrupt Activities Act, 2004 (Act No. 12 of 2004), the Prevention of Organised Crime Act, 1998 (Act No. 121 of 1998), or the Financial Intelligence Centre Act, 2001 (Act No. 38 of 2001), or an offence in terms of this Act or the National Gambling Act, or has been convicted of any other offence and has been sentenced to imprisonment without the option of a fine, unless the person has received a grant of amnesty or free pardon for the offence;				
(g)	Am not the husband or wife, or a partner in a customary marriage, or a partner in a permanent relationship which calls for cohabitation and mutual financial and emotional support, of a person referred to in paragraph (a);				
(h)	Am not a relative of a member of the Board;				
(i)	Am not or was, during the preceding 12 months, a member or employee of the Board or an inspector;				
(j)	Am not a member or employee of the board established by the National Gambling Act or is a relative or member or employee of such board;				
(k)	Am not listed on the register of excluded persons contemplated by section 14(7) of the National Gambling Act; or				
(1)	Am a fit and proper person, in that my character, integrity, honesty, prior conduct, regard for the law, reputation, habits and associations may reasonably not pose a threat to the health, safety, morals, good order and general welfare of the inhabitants of the Republic of South Africa or the Province and to the provisions and policy of this Act or the National Gambling Act.				
Signat	ture of Applicant				
	eponent has acknowledged that he/she* knows and understands the contents of this Affidavit which was sworn rmed* by the deponent before me aton this day of				
Signat	20				
_	e of the Peace/Commissioner of Oaths				
Eull M	TIMO.				
Full No					
	for which appointed				
	held if appointment held ex officio				



PART 8: APPLICATION CHECKLIST	
All questions been answered in full.	
The bottom of each page been initialled by the applicant.	
The payment of Application Fee is accompanying the application or Proof of payment of Application Fee is attached.	
All attachment prepared as a result of there being insufficient space on the application form have been clearly labelled with the applicant's name being reflected on the top of each page in accordance with the requirements of Part 1 (Instructions and General Information).	
A certified copy of Identity Document (certification no longer than three (3) months)	
Two passport-size photographs, with Identity Number, Initials and Surname on the reverse.	
A full set of fingerprints (form SAP 91(a)) or a valid police clearance certificate (no older than three (3) months).	
Attachment labelled Part 3 - Copy of Work Permit or Residence Permit (in the case of a foreign applicant).	
Attachment labelled Part 3.2 – Details of any civil lawsuits or related matters.	
Attachment labelled Part 3.3 – Details of the Social Grant and a copy of the latest slip. If the salary is above the threshold determined by the relevant Minister, details of the Social Grant, a copy of the latest slip and proof of cancellation issued by South African Social Security Agency (SASSA) or copy of application thereof.	