

APPLICATION FOR A LICENCE: ROUTE OPERATOR – NATURAL PERSON

Section 56 (2) of the KwaZulu-Natal Gaming and Betting Act No 08 of 2010

(2) Any person who wishes to obtain a route operator licence to make limited payout machines available for use in premises of site operators, may apply to the Board for such a licence in the manner prescribed and must pay the application fee prescribed in Schedule 2.



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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 form must be completed by any person who wishes to apply for a Route Operator Licence in terms of Section 56(2) of the KwaZulu-Natal Gaming and Betting Act, 2010, (Act No. 8 of 2010).

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 labelled, and the name of the applicant reflected on the top of each page.
- 1.3.7 All amounts recorded on the application form must be in South African Rands.
- 1.3.8 For the purposes of this application, the word "business" includes any corporate entity, partnership or trust.
- 1.3.9 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.
- 1.3.10 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 Identification of Confidential Information

- 1.4.1 Section 30 (5) of the KwaZulu-Natal Gaming and Betting Act, 2010, requires that any application lodged with the Board shall be available for inspection by the public who may also request copies of or extracts from the application. The Board has powers to determine, upon good cause being shown by the applicant, that any document or information identified by such applicant and which relates to the following, shall not be open to public inspection, provided that the Board may make such document or information available to anyone investigating the application on its behalf:
 - (a) The financial position of any person participating in an application;
 - (b) The names of prospective employees of the applicant concerned;
 - (c) The business plans of an applicant; or
 - (d) The financial statements, where possible.
- 1.4.2 Should there be any particulars, document and information included in the application which the applicant feels should not be disclosed to the public and which can be separated from the remainder of the application, kindly identify such particulars, document and information and show cause to the Board as to why it should make a ruling for non-disclosure. To assist the Board in this regard, kindly also furnish one bound and one loose-leaf copy of the application excluding the information that should not be made available for public inspection, as detailed in paragraph 1.5 (d) below.

1.5 Number of Copies Required to be Submitted to the Board

The applicant is required to submit the following copies:-

- (a) One (1) loose-leaf copy of the entire application and attachments;
- (b) One (1) original bound copy of the entire application and attachments;
- (c) Three (3) bound copies of the entire application and attachments;
- (d) Two (2) bound copies excluding confidential information for the purpose of public inspection.



1.6 Address for Submission of Application

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

KwaZulu-Natal Gaming & Betting Board

Private Bag X9102 PIETERMARITZBURG KwaZulu-Natal

3200

4300

The Chief Executive Officer

KwaZulu-Natal Gaming & Betting Board

Natalia Building

330 Langalibalele (Longmarket) Street

PIETERMARITZBURG KwaZulu-Natal

Or

The Chief Executive Officer

KwaZulu-Natal Gaming & Betting Board

3 Nollsworth Crescent Nollsworth Park La Lucia Ridge Durban The Chief Executive Officer

KwaZulu-Natal Gaming & Betting Board

P O Box 555 Umhlanga Rocks

Durban 4320

1.7 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.

Application for Route Operator Licence	R 5 600.00
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1.8 Investigation Costs

- 1.8.1 In terms of the Act, applicants are required to pay a deposit for investigation costs, the amount of which will be determined once the application has been assessed. Once the investigation has been completed, a reconciliation of all the expenses incurred by the Board will be prepared and the difference will be paid by either party.
- 1.8.2 No investigation will commence before such deposit for investigation costs has been paid, and proof of such payment provided to the Board.



PART 2:	APPLICATION DETAILS	
2.1	Applicant's Namo	
	Applicant's Name	
2.2	Trading Name	
2.3	Details of person to be contact	ed in connection with this application:
Full Nar	me and Surname	
Title		
Designo	ation / Position	
Postal A	Address	
Telepho	one Number (Including Code)	
Cellula	/Mobile Number	
Fax Nu	mber (Including Code)	
2.4		elled Part 2.4, provide a full description of the limited payout machines, ers, which the applicant intends to make available for play.
2.5	As an attachment clearly labe of limited payout machine, as a	lled Part 2.5, provide the relevant certification by the SABS for each type contemplated in Regulation 94.
2.6	As an attachment clearly labe	elled Part 2.6, provide details as to the ownership of the limited payout

2.7 As an attachment clearly labelled Part 2.7, provide details of the physical address of the site or sites in or at which the applicant intends to make the limited payout machines available for play and full disclosure of the number of limited payout machines intended for each site and all financial and other agreements or contracts already entered into or intended to be entered into with each potential site operator.

hiring of the limited payout machines concerned.

machines or of any contract or agreement with another party in connection with the leasing, lending or

- 2.8 As an attachment clearly labelled Part 2.8, provide confirmation and details of how all limited payout machines will be linked to the national central electronic monitoring system established and maintained in terms of the National Gambling Act.
- As an attachment clearly labelled Part 2.9, provide a detailed three (3) year transformation plan which seeks to substantially increase participation of historically disadvantaged persons within the industry, providing details of ownership, skills transfer, operational involvement, socio-economic development etc.



PART 3: PERSONAL HISTORY DISCLOSUR	E: APPLICANT
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	
Trading Name	
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)	
As an attachment clearly labelled Part 3, in the Residence Permit	e case of a foreign applicant, provide a copy of Work Permit or
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	
Fax	
Cell/Mobile	
E-mail Address	
Website Address	
Address Information	
Present Residential Address	
(In relation to current workplace)	
Present Business Address (Postal)	



Present Business Address (Physical)						
		at which you have been pern rking backwards:	nanently res	ident over the lo	ast 5 years, begin	ning with your current
Period		Street and Number		Suburb	City	Province/State &
From	То					Country
	l Descrip	tion	T			
Height						
Scars						
Tattoos						
Other D	istinguish	ing Marks				
Marital:	Status					1
		Divorced/Widow/Widower	1			
Mamea	/3111916/1	Divorced/ Midow/ Midower				
Details (of Spouse	e/Partner				
(This includ	des all mari	tal unions or a relationship where you live / Date of Commencement	e together in a	manner resembling	a marital union)	
		r (as above)				
Place where Married (if applicable)						
Full Name of Spouse/Partner						
Spouse/Partner's Maiden Name (if applicable)						
Place of Birth of Spouse/Partner						
Spouse	/Partner's	Occupation				
		ress of Spouse/Partner's				
Employe	5 1					



				GAMING & BETTING BOARD	
Parents' Particulars					
Full Name of Father					
Father's Date of Birth					
Father's Occupation					
Full Name of Mother					
Mother's Date of Birth					
Mother's Occupation					
Particulars of Brothers and Siste	rs				
Full Names	Relationship	Age	Identity Number	Occupation	

Particulars of Brothers and Sisters				
Full Names	Relationship	Age	Identity Number	Occupation

Full Names	Relationship	Age	Identity Number	Occupation

Academic Information	
Highest Class of School Education Level	
Attained	
Name and Place of School	
Year Completed	
Name of Last Tertiary Institution Attended	
Professional Qualifications	
Year Completed	
Present Studies	
Name of Institution/School	
Date of Commencement	



3.1	Arrests	Detention	and C	Convictions	(excluding	minor traffic	offences)	1:

NB: It is very important that this part is answered correctly and honestly. Bear in mind that even where a fine was paid, where no jail term was served or where a case was withdrawn, this should be disclosed if the incident occurred in the past ten (10) years from the date of completion of these forms. Non-disclosures are seen in a very serious light by the Board and will lead to disqualification.

- 3.1.1 Have you ever in the past ten (10) years, in South Africa or elsewhere been -
- (a) Convicted of an offence (including a payment of a fine)? *Yes/No
- (b) Arrested, detained, charged or summoned before a court to answer for any offence or violation for any reason whatsoever, regardless of the outcome of the event (including the payment of a fine or withdrawal of a case)?

 *Yes/No

If "yes" to either question, provide details below, listing all cases without exception:

Nature of Offence	Province/State & Country	City/Town	Date of Offence	Result of Court Case or Hearing

3.1.2	Has your spouse, partner or any member of your family ever been, in the last ten (10) years, convicted of
	an offence, in South Africa or elsewhere?
	*Yes/No

If "yes", provide details below:

Name	Relationship	Charge	City/Province/State & Country	Date of Offence	Result of Court Case or Hearing

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
(0)	Has your salary, wages, earnings or other income ever been subject to garnishee order or attachment?
(c)	*Yes/No
(d)	Have you ever had any article repossessed by a finance company?
	*Yes/No
If "yes" t	to any of questions (a) to (d) above, furnish details as an attachment page clearly labelled Part 3.2.

3.3	3.3 Employment / Business History					
Currer	nt Occup	oation				
Beginn	ning with	your current employment, list y	our employment histo	ory, including all businesses with w	hich you have been involved and period	ds of unemployment:
Period		Name and Address of	Job Title	Description of Duties	Reason for Leaving	Contact Person
From	То	Employer/Business		(2)		
	l			(i)		
			_			
				(**)		
	I		1	(ii)		
			_			
	I	T		(iii)		
			-			
				<i>r</i> . 1		
		Г		(iv)		
			1			



Period	Name and Address of Employer/Business	Job Title	Description of Duties	Reason for Leaving	Contact Person
			(v)		
			(vi)		
			(vii)		
			(∨ii)		



3.4		nt of misconduct relating to fraud,		n any employment in an office of trust on money, or any other reason?
	If "yes'	', provide details below:		
Date		Name and Address of Employer	Contact Person	Reason for Dismissal, Discharge or Resignation
				O ROSIGNATION
3.5	active		ent or operation there	h which you have been associated and of as a director, partner or such other
3.6	Profes	sional/Ethical History		
List pre	esent an	d past membership (within the past	five (5) years) of profess	ional bodies or organisations:
Body /	' Organi:	sation	Period	
(a)	miscoi *Yes/N	nduct or any other breach of their r		ional body or organisation for ethical
	,00	. 1		



(b)	Have you ever been directly involved in the management of any entity that has been placed in 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:
(e)	To your knowledge, have you ever been associated with an entity that is currently, or has been, under investigation by any government and/or licensing authority? *Yes/No
	If "yes", provide details:
3.7	Other Applications for Gaming and / or Betting Related Licences
(a)	Have you ever been granted a licence or registration by any licensing authority to conduct any gaming and/or betting activity or to operate as a manufacturer, supplier or maintenance provider? *Yes/No
	If "yes", provide details:



(b)	Have you ever applied for a licence or registration to any licensing authority to conduct any gaming and/or betting activity or to operate as a manufacturer, supplier or maintenance provider and withdrawn the application prior to final action thereon by the government authority concerned? *Yes/No
	If "yes", provide reasons for the withdrawal of the application:
(c)	Have you ever applied for and been refused a licence or registration by any licensing authority to conduct any gaming and/or betting activity or to operate as a manufacturer, supplier or maintenance provider? *Yes/No
	If "yes", provide details:
(.1)	
(d)	Have you ever had a licence or registration to conduct any gaming or betting activity or to operate as a manufacturer, supplier or maintenance provider cancelled or suspended or, alternatively, has a licensing authority ever considered cancelling or suspending such licence or registration? *Yes/No
	If "yes", provide details:
(e)	Do you have any application for a licence or registration to conduct any gaming and/or betting activity or to operate as a manufacturer, supplier or maintenance provider awaiting final action by a licensing authority? *Yes/No
	If "yes", provide details:
3.8	Provide brief details of the role you have or will have in the management of the business which is the subject of this application:
3.9	Provide brief details of any management experience you have had in the gambling industry:
	The state of the s



3.10	Have you ever applied for and been refused and/or betting industry or been disciplined by *Yes/No	d registration or a licence for employment in the gaming any gambling regulatory body?
	If "yes", provide details:	
3.11	Have you ever been excluded from a gaming *Yes/No	and/or betting establishment anywhere in the world?
	If "yes", provide details:	
3.12	betting establishment which has had its licen	% or more in the business or premises of a gaming and/or ace refused, revoked or withdrawn, or been the direct or or withdrawal in any licensing jurisdiction in the world?
	If "yes", provide details:	
3.13		d/or betting licence or are you registered to perform any ng activity? (For example, casino, manufacturer, route ee)
	If "yes", provide details:	
Licenc	се Туре	Jurisdiction
3.14	Are you currently:	
	A constitute of our result is a constitute of our constitution	and an of the Courtle African Dallas Couries and are official
a)	law enforcement agency in a gambling jurisdic *Yes/No	ember of the South African Police Services or any official ction outside of the Republic?
(b)	A member of Parliament or any provincial legis *Yes/No	slature?
(c)	A member of a local authority or any council of a member of the House of Traditional Leaders? *Yes/No	or board established in terms of the Constitution, including
(d)	An office bearer or employee of any political p	party or organization?



	If "yes" to any of the questions (a) to (d) above, provide details:
3.15	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 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
	If "yes" to any of the questions (a) to (d) above, provide details:
3.16	Are you at present, or were you during the preceding twelve (12) months, a member of the KwaZulu-Natal Gaming and Betting Board, or a member of its staff or an inspector of the Board? *Yes/No
	If "yes", provide details:
3.17	Are you a subject to an order of a competent court holding you to be mentally unfit or deranged?
3.17	*Yes/No
	If "yes", provide details:
3.18	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 KwaZulu-Natal
	Gaming and Betting Act, 2010 (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).

	partner referred to in (a).					
3.19	Are you listed on the register of Gambling Act? *Yes/No	f excluded persons contempla	ted by Section 14(7) of the National		
	If "yes", provide details:					
3.20	Have you ever been involved in ille *Yes/No	egal gambling in South Africa, o	r elsewhere in the w	orld?		
	If "yes", provide details (including o	dates and/or year/s):				
3.21	Credit History					
(a)	Are you currently in default for pay *Yes/No	Are you currently in default for payment of any debts incurred solely or jointly in your name? *Yes/No				
	If "yes", provide details below:					
Credit	or	Total Amount Owing (Rands)	Total Amount in Default (Rands)	Number of Days Overdue		
(b)	Is any person, including any entit any such agreement? *Yes/No	y, in respect of whom you hav	e provided a guard	antee, in default of		
	If "yes", provide full particulars:					



(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:
3.22	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 that is subject to winding-up or judicial management? *Yes/No
	If "yes", provide full particulars:
(c)	Do you control, manage or hold in trust for another person, any assets or liabilities? *Yes/No
	If "yes", provide details:
(d)	Has the applicant submitted his/her tax returns timeously in the past three (3) years? *Yes/No
	If "no", provide details:
(e)	Has the applicant's income tax return or assessment in South Africa or elsewhere been subjected to a query by South African Revenue Services or its equivalent within the past three (3) years? *Yes/No
	If "yes", provide details:
As an	attachment labelled Part 3.22, provide an original copy of a valid tax clearance certificate.



(f)	State the amount invested/to be invested in the business which is the subject of this application and the percentage of ownership this represents or will represent:
(g)	Has your interest in the business which is the subject of this application been assigned, pledged or sold to any person or organisation, or will any agreement be entered into whereby your interest is or may be assigned, pledged or sold either in part or in whole? *Yes/No
	If "yes", provide full particulars:



PART 4: STATEMENT OF ASSETS AND LIABILITIES

	STATEMENT OF ASS	ETS	
AS AT			
List all assets, movable and immova Enter the amo	able, tangible or into		
ASSETS	ORIGINAL COST/INVESTMENT		CURRENT ESTIMATED MARKET VALUE
	COST/TINVESTIMENT	-	MARKET VALUE
Carela in Davida (Cala a duda (CAII)			
Cash in Banks (Schedule "A")	R		R
Accounts and receivables (Schedule "B")	R		R
Stocks and Bonds (Schedule "C")	R		R
Interest in any business/es (Schedule "D")	R		R
Real Estate / Land / Property (Schedule "E")	R		R
OTHER ASSETS (Schedule "F")			
Clothing	R		R
From those			
Furniture	R	!	R
Electronic Equipment	R		R
TOTAL ASSETS	D		D
IOIAL ASSEIS	R	!	R
		•	
		SIGNATURE:	
		DATE:	



STATEMENT OF LIABILITIES						
AS AT						
List all liabilities on the appropriate line Each listed liability must be						
LIABILITIES	ORIGINAL AMOUNT		CURRENT MARKET VALUE			
Accounts Payable (credit cards etc.)	R		R			
Taxes Payable	R		R			
Notes Payable (Schedule "G")	R		R			
Mortgage Payable (Schedule "H")	R		R			
Real Estate (Schedule "I"						
Contingent and Other Liabilities (schedule "J")	R		R			
TOTAL LIABILITIES	R		R			
NET WORTH	R					
Where total liabilities exceed total assets (negative measures taken by the applicant to address this defic		planation must be p	provided as to the reasons and the			
		SIGNATURE:				
		DATE:				



SCHEDULE "A"

CASH IN BANKS

List below all bank accounts (foreign and domestic), maintained by you, your spouse or dependent children.

Name and Address of Bank	Names of Persons Appearing on Account	Account Number	Date Opened	Interest Rate	Type of Account	Balance (As on Date)

SIGNATURE:	 DATE:	



SCHEDULE "B"

Accounts and Notes Receivable

List below all accounts and notes receivable held by you, your spouse or dependent children.

[Indicate by means of an asterisk (*) in the first column, accounts and notes receivable held by your spouse and/or dependent children.]

Name and Address of Debtor	Date Incurred	Original Amount	Unpaid Balance	Payment Period	Interest Rate	Maturity Date	Purpose	Collateral

SIGNATURE:	 DATE:	



SCHEDULE "C"

Stocks and Bonds

List below the information requested for all stocks and bonds held or controlled by you, your spouse or dependent children. Whenever interest exists through a mutual fund or holding company, the stocks held by such mutual fund or holding company need not be listed; whenever such interest exists through the beneficial interest in a trust, the stocks and bonds held in such trust shall be listed if you, your spouse or dependent children have knowledge of what stocks and bonds are so held.

[Indicate by means of an asterisk (*) publicly traded shares and bonds.
Indicate by means of a double asterisk (**) next to the first column all stocks and bonds held by your spouse or dependent children.]

Issuer	Туре	Number of Shares or Units	Purchase Price	Date of Purchase	Name in Which Held	Market Value

IGNATURE:		DATE:	
IGNATUKE:	•••••		



SCHEDULE "D"

Interest in any Business/Businesses

List below the information requested regarding any business investments in which any direct, indirect, vested, or contingent interest is held by you, your spouse or dependent children, along with the names of all individuals or entities who share a direct, indirect, vested or contingent interest therein. This should include but not be limited to joint ventures, partnerships, sole proprietorships and corporations.

Entity Name	Type of Entity	Number of Shares or Units	Percent of Ownership	Purchase Price	Date of Purchase	Name in Which Held	Market Value	Names of Individuals or Entities Sharing Interest and Percentage of their Ownership

SIGNATURE:	 DATE:	••••••



SCHEDULE "E"

Real Estate

List below the information requested regarding any real property in which any direct, indirect, vested, or contingent interest is held by you, your spouse or dependent children, along with the name of all individuals or entities who share a direct, indirect, vested or contingent interest therein.

Address / Location	Туре	Size	Purchase Price / Improvement Cost	Date of Purchase	Other Owners	Name in Which Held	Market Value	Names of Individuals or Entities Sharing Interest and Percentage of their Ownership

SIGNATURE:	 DATE:	



SCHEDULE "F"

Other Assets

List below the information requested for all other assets held by you, your spouse or dependent children.

[Indicate by means of an asterisk (*) in the first column those assets held by your spouse or dependent children (i.e. motor vehicles, personal property, cash surrender value of life insurance policies, pension funds, etc.)]

Type of Asset	Purchase Price	Date of Purchase	Market Value	Other Information

SIGNATURE:		DATE:	
	***************************************		••••••



SCHEDULE "G"

Notes Payable

List below the information requested for all notes payable for which you, your spouse or dependent children are obligated.

[Indicate by means of an asterisk (*) in the first column those notes for which your spouse or dependent children are obligated.]

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment Period	Interest Rate	Maturity Date	Purpose	Collateral

SIGNATURE:	 DATE:	



SCHEDULE "H"

Mortgage Payable

List below the information requested for all mortgages or liens payable on real estate for which you, your spouse or dependent children are obligated.

[Indicate by means of an asterisk (*) in the first column those mortgages/liens for which your spouse or dependent children are obligated.]

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment Period	Interest Rate	Position of Mortgage or Lien	Maturity Date	Description / Address of Real Estate

SIGNATURE:	 DATE:	



SCHEDULE "I"

Real Estate

List below the information requested for all real estate for which you and/or your spouse or dependent children are obligated.

[Indicate by means of an asterisk (*) in the first column any indebtedness for which your spouse or dependent children are obligated.]

Name and Address of Creditor/Bank	Date Incurred	Original Amount	Unpaid Balance	Payment Period	Interest Rate	Maturity Date	Description / Address of Real Estate

SIGNATURE:		DATE:	



SCHEDULE "J"

Contingent and Other Liabilities

List below the information requested for all contingent liabilities for which you and/or your spouse are obligated.

[Indicate by means of an asterisk (*) in the first column those contingent liabilities for which only your spouse is obligated.]

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment Period	Interest Rate	Maturity Date	Purpose	Collateral	Persons Liable Besides You and / Or Your Spouse

 DATE:	•••••
	DATE:



PART 5: APPLICAN	T'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 whom so ever else this authorisation may be duly presented.
FROM	
(Full Name and Surname)	
IDENTITY NUMBER	

As a requirement of my involvement in an application for a Route Operator licence within the Province of KwaZulu-Natal, I agree to allow the KwaZulu-Natal Gaming and Betting Board, its consultants, and the South African Police 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 or correspondence pertaining to me.

YOU ARE HEREBY AUTHORISED to release to the Chief Executive Officer of the KwaZulu-Natal Gaming and Betting Board and, its consultants, the South African Police Services or an authorised delegate, all information requested by any of them, documentary or otherwise, pertaining to me. This authorisation shall supersede and countermand any prior request or authorisation to the contrary. A photocopy of this authorisation will be considered as effective and 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							
l,						of	
			(Full Name of	Declarant)			
			/ A al alvaga at F) a al avenue ti			
			(Address of E	Jeciarant)			
every detail a				nformation supplie orm has been fully		s is true and correct in	
Signed at				on			
Signature of D	eclarant						
Signature of W	/itness						
Name of Witne	ess (Print)						



PART 7: AFFIDAVIT BY PERSON MAKING APPLICATION FOR A ROUTE OPERATOR LICENCE IN TERMS OF THE KWAZULU-NATAL GAMING AND BETTING ACT, NO. 8 OF 2010 (the Applicant) do hereby state that: I am not disqualified, in terms of Section 32 of the KwaZulu-Natal Gaming and Betting Act, from being granted a licence or reaistration in terms of this Act, in that I:-(a) Am not 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 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; Am not the husband or wife, or a partner in a customary marriage, or a partner in a permanent relationship which calls (g) 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; Am not or was, during the preceding 12 months, a member or employee of the Board or an inspector; (i) Am not a member or employee of the board established by the National Gambling Act or is a relative or member or (j) 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 Am a fit and proper person, in that my character, integrity, honesty, prior conduct, regard for the law, reputation, habits (I) 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. **Signature of Applicant** The deponent has acknowledged that he/she* knows and understands the contents of this Affidavit which was sworn to/affirmed* deponent before this of Signature Justice of the Peace/Commissioner of Oaths Full Name Address Area for which appointed Office held if appointment held ex officio



PART 8: APPLICATION CHECKLIST				
General				
All questions have been answered in full.				
The bottom of each page has 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 pages 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 (3) months).				
Attachment clearly labelled Part 2.4 – Provide a full description of the limited payout machines, together with their serial numbers, which the applicant intends to make available for play.				
Attachment clearly labelled Part 2.5 - Provide the relevant certification by the SABS for each type of limited payout machine, as contemplated in Regulation 94.				
Attachment clearly labelled Part 2.6 - Details as to the ownership of the limited payout machines or of any contract or agreement with another party in connection with the leasing, lending or hiring of the limited payout machines concerned.				
Attachment clearly labelled Part 2.7 - Details of the physical address of the site or sites in or at which the applicant intends to make the limited payout machines available for play and full disclosure of the number of limited payout machines intended for each site and all financial and other agreements or contracts already entered into or intended to be entered into with each potential site operator.				
Attachment clearly labelled Part 2.8 - Provide confirmation and details of how all limited payout machines will be linked to the national central electronic monitoring system established and maintained in terms of the National Gambling Act.				
Attachment clearly labelled Part 2.9 - Provide a detailed three (3) year transformation plan which seeks to				
substantially increase participation of historically disadvantaged persons within the industry, providing				
details of ownership, skills transfer, operational involvement, socio-economic development etc.				
Attachment clearly 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 3.22 - An original copy of a valid tax clearance certificate.				