

# Venue operator's licence – approval as an associated entity

This package contains the application and information material for approval as an associated entity of a venue operator.

## How to apply

This is an interactive PDF form which allows you to:

- complete the form using a computer or tablet
- save your progress and continue at a later time
- print the completed form to sign and return.
- You are still able to print the form and complete it by hand if you prefer.

This form has been designed to be completed using the free Adobe Acrobat Reader software. To download this free software, [please visit the following link](#) or search for the free "Adobe Acrobat Reader" on your devices app store.

This form may not function as intended if you use any other software.

### Send application to:

Victorian Gambling and Casino Control Commission  
GPO Box 1988  
Melbourne Vic 3001

### or lodge in person at:

Level 4, 12 Shelley Street  
Richmond Vic 3121

### or via email to:

[contact@vgccc.vic.gov.au](mailto:contact@vgccc.vic.gov.au)

## Need help?

For more information on how to apply for a gambling licence or permit:

- visit the Victorian Gambling and Casino Control Commission (VGCCC) website at [vgccc.vic.gov.au](http://vgccc.vic.gov.au)
- telephone the VGCCC on 1300 599 759
- email the VGCCC at [contact@vgccc.vic.gov.au](mailto:contact@vgccc.vic.gov.au)

### Privacy Policy

The VGCCC is committed to responsible and fair handling of personal information consistent with the *Privacy and Data Protection Act 2014* and its obligations under the *Gambling Regulation Act 2003 (the Act)*.

### Confidentiality Provisions

Information provided in your application must not be disclosed by the VGCCC or its staff to someone else, except for the purposes stated in Part 1, Division 6 of Chapter 10 of the Act. Go to [vgccc.vic.gov.au](http://vgccc.vic.gov.au) to access this Act.

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# Important information

This application is an important part of the approval process for a Venue operator's licence. An application for a new Venue operator's licence cannot be granted by the Victorian Gambling and Casino Control Commission (the VGCCC) until all associates of the applicant have been identified and approved. It is also a requirement that current licensees ensure that this form is submitted for approval of all new associates.

## Lodgement of Associate forms

You must carefully review the associated entity form and lodgement guide (see page 4) to ensure it is fully completed and that **all** required attachments are provided. This simple check could save unnecessary delays in registration and processing time of the application. **Note:** The application form will be returned if a response to every applicable question is not provided or if all required attachments are not enclosed or if the correct application fee is not paid.

## Application fee

To confirm the current fee, refer to the 'Gambling fees and fines' information sheet available at [vgccc.vic.gov.au](http://vgccc.vic.gov.au).

Where an entity is seeking approval as an associate of an applicant for a *new* venue operator's licence, associate documentation forms part of the licence application and must be forwarded to the VGCCC as part of this application. A venue operator's licence application will not be accepted or registered by the VGCCC if an incomplete associate form is submitted. The full application will be returned to the applicant with instructions that the relevant associated entity form is incomplete and must be completed before the application will be registered.

## Applying as part of another application

**Note:** No fee is payable for this application if your application is attached to one of the following:

- an application for a New Venue Operator's Licence
- an application for Renewal of a Venue Operator's Licence
- an application by another person to be an Associated Entity of a Venue Operator where that person is paying the fee.

If the entity is seeking approval as an associate of the holder of a *current* Venue operator's licence, this application form can be lodged as follows:

### Delivery to the VGCCC's office:

Victorian Gambling and Casino Control Commission  
Level 4, 12 Shelley Street, Richmond

### Mail to:

Victorian Gambling and Casino Control Commission  
GPO Box 1988  
MELBOURNE VIC 3001

## False or misleading information

It is an offence under the Act to give information that is false or misleading. If you give false or misleading information, your application may be refused and/or you may be prosecuted and fined up to 60 penalty units (go to Gambling Fees and Fines at [vgccc.vic.gov.au](http://vgccc.vic.gov.au) to confirm the current value of a penalty unit).

## Notification of change

### While your application is in progress

Between lodging the application and a decision being made about it, the VGCCC must be notified in writing about any changes to the information that has been provided (including any documents lodged with the application). Failure to provide the VGCCC with updated information may result in your application being refused.

### Following determination of your application

If approval is granted, an associate will also be given a set of directions which give the associate an ongoing responsibility to notify the VGCCC of specified changes in your situation. Whenever a specified change takes place, you must give written notice to the VGCCC within 14 days of the change taking place. If the VGCCC is not notified of a specified change, disciplinary action may be taken against the associate and/or the associate may be prosecuted and fined up to 60 penalty units.

# Lodgement guide

## DIRECTIONS FOR COMPLETION

### Answer every question and use BLOCK letters-

- If a question does not apply, or if there are no details to disclose in response to a particular question, print N/A (not applicable) in response.
- If the space available is insufficient, please supply the required information on an attachment page/s. If you do so, begin each answer with the title and reference of the question you are responding to.

**Prior to lodging this application, please ensure that you have attached all required items.**

**The application form will be returned to you if you do not provide a response to all applicable questions or if all required attachments are not enclosed.**

### The following documentation, where applicable, must be submitted with this application:

Associated Individual and Entity forms, completed by associates identified in Q24, Q25, Q26, Q27(d) and Q28 must be completed and include all required attachments.

Historical Organisational Extract (only applicable if the associated entity is a company) – *refer to Q18 and Attachment 1.*

Accountant or Auditor's Statement or Summary of financial information – *refer to Attachments 2 and 2(a).*

Business Credit File – *refer to Attachment 3.*

A **copy** of independent documentation confirming the court outcome or, if settled out of court, a **copy** of the settlement agreement – refer to 'legal action' section on page 6 for full details.

Financial Information Release form – *refer to page 15*

Consent for release of information by law enforcement agencies – *refer to page 16*

Authorisation by an associated entity – *refer to page 17*

A **copy** of Trust Deed (only applicable if the associated entity is a corporate trustee).

Strictly confidential

# Request for approval as an associated entity of a venue operator

## OFFICE USE ONLY

Allocation date:       /       /

Associated entity No: \_\_\_\_\_

Assigned to: \_\_\_\_\_

### Details of venue operator

1. This request for approval as an associated entity relates to (tick applicable box and provide details below):

- (a) an application for a new club venue operator's licence
- (b) an application for a new hotel venue operator's licence
- (c) an application for renewal of a club venue operator's licence
- (d) an application for renewal of a hotel venue operator's licence
- (e) an application as a new associate of the holder of a current club venue operator's licence
- (f) an application as a new associate of the holder of a current hotel venue operator's licence.

Venue Operator's name:

Venue Operator's Licence number (if applicable):

2. Reason for classification as an associate (tick appropriate box/es):

- (a) Ultimate holding company of the applicant/licensee
- (b) Related party, subsidiary or subsidiary company (as defined by the Australian Corporations Law) of the applicant/licensee
- (c) Shareholder of the applicant/licensee
- (d) Partner of the applicant/licensee
- (e) Unit holder of the applicant/licensee who, by virtue of the Trust Deed, is empowered individually or as a group to remove/change the Trustee or to influence the Trustee's decisions.
- (f) **Other** – explain below reason for classification as an associate:

### Associated entity's particulars

3. Name of associated entity:

4. Current residential address:

5. Postal address (if same as registered office address, write 'as above')

6. Contact Details:

Email address:

Telephone number:

Facsimile number:

7. Details of authorised officer completing this form on behalf of the associated entity:

Authorised officer's name:

Position with associated entity:

(Company director, secretary, treasurer, president, etc.)

Email address:

Telephone number:

Mobile number:

Facsimile number:

**Note:** The authorised officer must complete an Associated Individual form.

8. Has the associated entity operated or does it intend to operate under any other business name/s?

YES

NO

If **NO**, proceed to Q9. If **YES**, provide details below.

**9.** Has the associated entity's name or business/trading name changed in the last three (3) years?

YES NO

If **NO**, proceed to Q10. If **YES**, provide details below.

Name changed from:

Name changed to:

Date of change (dd/mm/yyyy):

Name changed from:

Name changed to:

Date of change (dd/mm/yyyy):

Name changed from:

Name changed to:

Date of change (dd/mm/yyyy):

Name changed from:

Name changed to:

Date of change (dd/mm/yyyy):

**10.** Has the Associated Entity ever been investigated by a regulatory body or law enforcement agency? (e.g. ASIC, RIA, APRA, ACCC)

YES NO

If **NO**, proceed to Q11. If **YES**, provide details below.

Name of regulatory body:

Nature of action:

Date of hearing (if known) (dd/mm/yyyy):

Result:

Have further details been provided on an attachment page?

YES NO

### Legal action

**11.** Has the Associated Entity ever been the defendant/respondent to any legal action in the past 10 years (including in progress)?

YES NO

If **NO**, proceed to Q12 (**Note:** Failure to disclose relevant legal action will delay determination of any new venue operator's licence connected to this application).

If **YES**, provide the following details:

Nature of legal action:

Plaintiff:

Jurisdiction\*:

Result/settlement:

Court or tribunal where matter was heard (if applicable):

Case number issued by court/tribunal (if known):

Date of delivery of judgement (dd/mm/yyyy):

If a matter has been finalised a **copy** of independent documentation confirming the court outcome or, if settled out of court, a **copy** of the settlement agreement **must** be provided, regardless of whether any terms of the agreement are confidential.

Is a copy of the court outcome or settlement agreement attached?

YES NO

Have further details been provided on an attachment page?

YES NO

**12.** Is there any legal action currently being pursued against the associated entity?

YES NO

If **NO**, proceed to Q13 (**Note:** Failure to disclose relevant legal action will delay determination of any new venue operator's licence connected to this application).

If **YES**, provide the following details for each action:

Nature of legal action:

Plaintiff:

Jurisdiction\*:

\* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality.

Court or tribunal where matter is scheduled to be heard (if applicable):

Case number issued by court/tribunal (if known):

Next scheduled hearing date (dd/mm/yyyy):

Have further details been provided on an attachment page?

YES NO

### Racing and gambling history

**13.** Has the Associated Entity ever applied for **any** racing or gambling industry licence, approval, authorisation or registration?

YES NO

If **NO**, proceed to Q14. If **YES**, provide the following details for each application and then proceed to Q14.

**(a).** If the application was granted/approved or is still pending, provide details below:

Type of licence, approval etc:

Licence No. (if known):

Name of Racing/Gaming Regulator (if known):

Name shown on licence, approval etc:

Licence/approval association date (mm/yyyy):

to

**(b).** If the application was refused or withdrawn, provide details below:

Type of licence, approval etc sought

Licence No. (if known):

Date of application (mm/yyyy):

Name of Racing/Gaming Regulator (if known):

Reason for refusal or withdrawal:

Have further details been provided on an attachment page?

YES NO

**14.** Has the Associated Entity ever been the subject of disciplinary action, or had an application for any licence or permit refused?

YES NO

If **NO**, proceed to Q15. If **YES**, provide the following details:

Type of licence, approval etc:

Licence No. (if known):

Jurisdiction\*:

Name of Racing/Gaming Regulator (if known):

Details of action taken or any special conditions or restrictions imposed on a licence, approval, etc:

Have further details been provided on an attachment page?

YES NO

\* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality.

## Charges, findings of guilt and convictions

**15.** Has the Associated Entity ever been charged with, or found guilty of, a criminal offence, or been investigated by a law enforcement agency for an alleged offence against the Associated Entity?

YES NO

If **NO**, proceed to Q16.

If **YES** give details below and indicate on an attachment page if the current ownership or management structure of the Associated Entity (e.g. directors, shareholders, trustees, beneficiaries, etc.) differs in any way from its ownership or management structure at the time of the offence(s):

Nature of offence:

Date (dd/mm/yyyy):

Jurisdiction\*:

Result of hearing or other disposition:

Have further details been provided on an attachment page?

YES NO

**16.** Has the Associated Entity ever taken part in a Diversion Program?

YES NO

If **NO**, proceed to Q17. If **YES**, provide the following details:

Nature of investigation or charge:

Jurisdiction\*:

Have further details been provided on an attachment page?

YES NO

**17.** Is there any investigation or charge currently pending against the associated entity in respect of any offence?

YES NO

If **NO**, proceed to Q18. If **YES**, provide the following details:

Nature of investigation or charge:

City or town:

Jurisdiction\*:

Have further details been provided on an attachment page?

YES NO

## Corporate structure and establishment of associates

### IMPORTANT INFORMATION

#### Historical Organisational Extract from the Australian Securities and Investments Commission (ASIC)

##### Associated Entities incorporated under Australian Corporations Law

All associated entities incorporated under Australian Corporations Law must lodge with this application form a Historical Organisational Extract from ASIC (refer to instructions at Attachment 1).

##### Associated Entities not incorporated under Australian Law

A Historical Organisational Extract from ASIC is **not** required for an entity which is not registered with ASIC or **not** incorporated under Australian Corporations Law. Instead, to assist the VGCCC with its investigations it is requested that an entity based outside Australia seek an equivalent report from the relevant overseas agency to be forwarded for the VGCCC's consideration. For further details about Historical Organisational Extracts and the type of information contained in the report, refer to the instructions contained in Attachment 1.

**18.** Is the Historical Organisational Extract or an overseas equivalent report attached?

YES NO N/A

If **YES**, proceed to Q19.

If **NO**, is an equivalent report from the regulatory authority in each of those jurisdictions attached?

YES NO

Have further details been provided on an attachment page?

YES NO

**19(a).** State below how the profits of the associated entity are to be distributed (e.g. distributions to beneficiaries, trusts, dividends to shareholders, capital investment, etc):

\* "Jurisdiction" means the State or Territory and, if outside Australia, the country and locality.



**19(b).** Provide details of profit distribution by the associated entity for the last three (3) financial years (include amounts of distribution and the names of beneficiaries of any distribution):

Have further details been provided on an attachment page?

YES NO

**If the associated entity is a COMPANY, complete Q20 to Q27**

**20.** Date of incorporation (mm/yyyy):

Place of incorporation:

Australian Company Number (ACN, or overseas equivalent if applicable):

Australian Business Number (ABN, if applicable):

**21.** List the ultimate holding company, as defined in Australian Corporations Law, of the associated entity (if applicable).

- **'ultimate holding company'** – a corporation that is a holding company of the company lodging the associated entity form and is itself a subsidiary of no other corporation.

Ultimate holding company's name:

**22.** List below details of any entity having control or significant influence over the financial and operating decision making policies of the entity currently seeking approval as an associate.

**Note:** Include the registered and commonly used business name of each entity.

**(i)** Registered name:

Australian Company Number (or overseas equivalent if applicable):

Business name:

Nature of organisation's business:

Relationship to the associated entity:

**(ii)** Registered name:

Australian Company Number (or overseas equivalent if applicable):

Business name:

Nature of organisation's business:

Relationship to the associated entity:

Have further details been provided on an attachment page?

YES NO

**23.** Give the total number of ordinary shares (voting and income entitlement shares) and preference shares (income entitlement shares only) of the associated entity:

**(a)** ordinary shares (voting and income entitlement shares):

Total number:

**(b)** preference shares (income entitlement shares only):

Total number:

**24.** List below the names of **all** shareholders who hold five (5) per cent or more of the total number of shares in the associated entity, and the number of shares held by each:

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

Full name of shareholder

Class of share

No. of shares held

**Note:** Shareholders with 10 per cent or more of income entitlement and/or voting right shares **must** complete an Associated Entity or Associated Individual form as appropriate. The VGCCC may at its discretion require any other shareholder in the associated entity to complete an Associate form.

**25.** Do any of the shareholders holding 5 per cent or more of shares in the associated entity hold those shares on behalf of or in trust for any person or entity?

YES

NO

If **NO**, proceed to Q26. If **YES**, provide details below:

Shares held by

Full name of beneficial owner

No. of shares held

Shares held by

Full name of beneficial owner

No. of shares held

Shares held by

Full name of beneficial owner

No. of shares held

**Note:** Any beneficial owner of shares named in response to Q25 holding a total of 10 per cent or more of ordinary or preferential shares **must** complete an appropriate Associate form.

**26.** List below the names of all current company directors and the company secretary (if a **company**) or the names of all current committee members and the secretary (if an **incorporated association**).

Name of office holder

Position held

**Note:** All individuals identified above **must** complete an Associated Individual form.

**27(a).** Is the associated entity a corporate trustee?

YES

NO

If **NO**, proceed to Q28. If **YES**, complete the following:

Name(s) of Trust:

Address:

Type of Trust (tick only one):

Discretionary Trust

Unit Trust

A **copy** of the Trust Deed must be provided. Is a **copy** of Trust Deed attached?

YES

NO

**27(b).** List below details of the individuals and/or entities that are beneficiaries or unit holders of the trust:

Full name:

Company

Individual (tick appropriate box)

% of ownership:

Voting

Income

Full name:

Company

Individual (tick appropriate box)

% of ownership:

Voting

Income

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

**27(c).** Specify which of the beneficiaries/unit holders of the trust received 10 per cent or more of the Trust's income distribution in any one of the last three (3) years:

**27(d).** Identify below any trust beneficiaries/unit holders with voting rights that, by virtue of the Trust Deed, enable them individually or as a group to remove/change the Trustee or to influence the Trustee's decisions:

**Note:** All beneficiaries or unit holders identified at Q27(d) must complete an Associated Entity or Associated Individual form as appropriate.

Have further details been provided on an attachment page?

YES NO

**If the associated entity is a PARTNERSHIP, complete Q28**

**28.** Partnership's Australian Business Number (ABN):

List below the details of the individuals and/or entities that constitute the partnership:

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

Full name:

Company	Individual (tick appropriate box)
% of ownership:	
Voting	Income

**Note:** All partners with a partnership interest of 10 per cent or greater of income or voting entitlements **must** complete an Associated Entity or Associated Individual form as appropriate.

Have further details been provided on an attachment page?

YES NO

## Financial particulars

### ACCOUNTANT OR AUDITOR'S STATEMENT

**The Accountant or Auditor's statement must be completed and provided with this application.**

#### Holding Company's Accountant or Auditor's statement (if applicable)

An Accountant or Auditor's statement must be completed and provided with this application in respect of the holding company, if applicable.

#### Summary of financial information

In lieu of providing an accountant or auditor's statement, the applicant can provide a summary of financial information for the three most recent completed financial years. The applicant is advised to consult with its accountant or auditor to ensure that the true and correct summary of financial information is provided. The VGCCC may subsequently request audited financial statements be submitted in the event that this summary is found to be incomplete, incorrect or misleading.

The applicant must also ensure the solvency declaration at the end of this section is signed by each Director of the applicant. The solvency declaration requires each Director to declare that they have a reasonable belief that the company will be able to pay its debts as and when they become due and payable.

This solvency declaration will assist the Commission to consider whether the applicant is of sound and stable financial background for the purposes of the *Gambling Regulation Act 2003*.

### IMPORTANT INFORMATION

#### Business Credit File

All associated entities (whether a company or an incorporated association) must lodge with this application form a Business Credit File from either illion or Equifax (refer to instructions at Attachment 3). Only matters not reported in this credit report should be disclosed when responding to Q31.

**29.** Is an Accountant or Auditor's statement for the Applicant or, where applicable, the holding company attached?

YES NO

If **YES**, proceed to Q30.

If **NO**, provide reasons on an attachment page.

If an Accountant or Auditor's statement is not attached, is the summary of financial information and Director's solvency declaration attached?

YES NO

Have further details been provided on an attachment page?

YES NO

**30.** Is a Business Credit File attached?

YES

**31.** Other than what has been disclosed on the Credit File, is the Associated Entity in default of any debt repayment or loan (including less than \$5,000)?

(**Note:** Do not include details **unless** a payment is overdue or in arrears)

YES NO

If **NO**, proceed to Q32. If **YES**, complete the following details (**Note:** All amounts must be stated in Australian currency):

Financial institution or creditor:

Amount owing (total amount):

\$

Amount in default (total amount):

\$

Date payment was due (dd/mm/yyyy):

Financial institution or creditor:

Amount owing (total amount):

\$

Amount in default (total amount):

\$

Date payment was due (dd/mm/yyyy):

Have further details been provided on an attachment page?

YES NO

**32.** Has the Associated Entity ever been wound up, placed into liquidation, had a receiver, controller, administrator or agent for a mortgage appointed, entered into a scheme of arrangement, or involved in other similar proceedings? (**Note:** Include any pending arrangements known to the associated entity)

YES NO

If **NO**, proceed to Q33. If **YES**, provide details below:

Type of proceedings:

Date action taken (dd/mm/yyyy):

Reason for action taken:

Details of administrator, liquidator, receiver, controller, regulatory body or law enforcement agency:

Name:

Telephone number:

Have further details been provided on an attachment page?

YES NO

**33.** Other than what has been disclosed on the Credit File, has the Associated Entity ever been subject to bankruptcy or any insolvency arrangements?

YES NO

If **NO**, proceed to Q34. If **YES**, provide details below:

**34.** Is the Associated Entity the guarantor for someone else's debt or loan?

YES NO

If **NO**, proceed to Q35.

If **YES**, is any person, including any corporation in respect of whom you have given a guarantee in default of any agreements with respect to payment of a debt or loan?

YES NO

If **YES**, provide details below:

Have further details been provided on an attachment page?

YES NO

**35.** Provide the name and full address of all financial institutions and other sources with which the associated entity has accounts, borrowings or investments:

**(i)** Financial institution/source name:

Branch/source address:

Nature of account:

**(ii)** Financial institution/source name:

Branch/source address:

Nature of account:

**(iii)** Financial institution/source name:

Branch/source address:

Nature of account:

Have further details been provided on an attachment page?

YES NO

### Declaration by authorised officer

I hereby:

- (i) acknowledge that I have read and understood the questions in this application form and the directions for answering them
- (ii) confirm that I have answered the questions truthfully and completely to the best of my knowledge
- (iii) consent to all information relating to the associated entity, in or pursuant to this application form, whether provided verbally or in writing, being made available to the applicant for a venue operator's licence in the event that the information and material provided by me may raise matters which the VGCCC considers should be provided or discussed with the applicant.

Signature of authorised officer

Date (dd/mm/yyyy):

Signature of witness\*:

Date (dd/mm/yyyy):

Print name of witness\*:

\* Any adult can be a witness.

## Payment details

### IMPORTANT INFORMATION

The prescribed fee must accompany this application. Please note that once an application has been registered, the application fee is non-refundable.

**Note:** To confirm the current fee, refer to the 'Gambling fees and fines' information sheet available at [www.vgccc.vic.gov.au](http://www.vgccc.vic.gov.au). The application fee can be paid by:

- cheque or money order, made payable to the Victorian Gambling and Casino Control Commission;
- EFTPOS or credit card (Visa or MasterCard)

If you wish to make payment by credit card, please lodge your completed application with the VGCCC and we will contact you directly to arrange payment if your application is accepted

**Privacy** – the VGCCC is committed to responsible and fair handling of personal information consistent with the *Policy and Data Protection Act 2014* and its obligations under the *Gambling Regulation Act 2003*. Credit card details will be destroyed once your payment has been processed.

# Financial information release form

*Gambling Regulation Act 2003*

In the matter of this request for approval as an associate of an applicant for or the holder of a venue operator's licence by:

Name:

(Full name of applicant)

Address:

(Full address of applicant)

Authorised officer:

(Full name of authorised officer signing the form on behalf of the associated entity)

The applicant hereby authorises all **persons** who receive a photocopy of this **financial information release form** from the Victorian Gambling and Casino Control Commission (the VGCCC) and its staff to undertake the **authorised actions** for the **authorised purposes** as set out below:

## AUTHORISED ACTIONS

(a). To allow the VGCCC and its staff or any other person appointed in writing by the VGCCC, to inspect and obtain a copy of any document, record or correspondence in the possession or under the control of any person, which contains information pertaining to the associate (or to the associate and another person and to any subsidiary, related body corporate, trust or partnership to which the associate was a party), including but not limited to:

- any loan information
- any information relating to an account held with a financial institution (passbook, statement or other), including information relating to withdrawals, deposits, transfers and balances
- any information (including trust account information) of any solicitor, accountant, real estate agent or other person who has the management or care of business or financial matters on behalf of the associate.

(b). To answer written or verbal queries of and to provide information (by any means) to the VGCCC and its staff or any other person appointed in writing by the VGCCC to undertake the authorised actions, about the financial resources of the associate.

## AUTHORISED PURPOSES

To enable the VGCCC to be satisfied, in considering the suitability of an associate of an applicant for or the holder of a venue operator's licence, that the applicant and its associates have desirable and satisfactory financial resources and, in conducting on-going monitoring, that those financial resources continue to be desirable and satisfactory.

## ACKNOWLEDGEMENT

I acknowledge having read and understood the terms of the consent and the release and have noted that independent legal advice may be sought before signing this consent. This authorisation commences on the date below and continues until the later of:-

- the VGCCC considers that the applicant is no longer an associated entity of a venue operator licence holder; or
- the expiry of any venue operator's licence (if granted).

A photocopy of this form will be considered as effective and as valid as the original.

Signature of applicant:

Date (dd/mm/yyyy):

(Signature of authorised officer on behalf of the associated entity)

Position:

(Authorised officer's position e.g. director, secretary)

## NOTES

1. This **financial information release form** is approved for the purposes of section 10.4.5 (1)(d) of the Gambling Regulation Act 2003. Among the people to whom it is intended to be produced are banks and other financial institutions, solicitors, accountants, financial advisers and any other person or organisation who has lent money to or borrowed from the associate.
2. In this **financial information release form**-reference to a member of staff of the VGCCC is reference to a person employed by the VGCCC to assist in the administration of the *Gambling Regulation Act 2003*.

# Consent for release of information by law enforcement agencies

*Gambling Regulation Act 2003*

In the matter of this request for approval as an associate of an applicant for or the holder of a venue operator's licence by:

Name: \_\_\_\_\_ of  
(Full name of applicant)

Address: \_\_\_\_\_  
(Full address of applicant)  
(applicant')

## Consent

The applicant hereby consents to all probity investigations carried out by the Victorian Gambling and Casino Control Commission (VGCCC) and its staff, including but not limited to:

(a) inspection of criminal, intelligence or other records kept or maintained by:

- the Victoria Police;
- any crime investigation agency;
- any gambling regulatory body;
- any Court;
- any State, Territory, federal or overseas police force;
- any corporate regulatory agency;
- any casino regulatory body;
- any government agency.

(collectively referred to as 'law enforcement agencies')

(b) release of particulars of any convictions, findings of guilt or other information recorded against the applicant by the law enforcement agencies including, without limitation:

- details of all prosecutions, including acquittals and matters withdrawn or dismissed and all findings of guilt, whether or not a conviction was recorded;
- matters or charges still outstanding;
- law enforcement agencies intelligence howsoever obtained;
- any other matters recorded as arising either in Victoria or elsewhere by any law enforcement agency and considered relevant by the VGCCC to the investigation or assessment of my application under the *Gambling Regulation Act 2003*.

## Release

Upon signing this consent, the applicant hereby releases the VGCCC, each law enforcement agency and their servants, agents or contractors to the full extent of the law and against any claim or demands of any kind and any actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken or made in respect of the use or misuse of the information obtained out of this consent, including particulars of any conviction, findings of guilt or other adverse material purporting to relate to the applicant.

## Acknowledgement

I acknowledge having read and understood the terms of the consent and the release and have noted that independent legal advice may be sought before signing this consent. This authorisation commences on the date below and continues until the later of:-

- the VGCCC considers that the applicant is no longer an associated entity of a venue operator licence holder; or
- the expiry of any venue operator's licence (if granted).

A photocopy of this form will be considered as effective and as valid as the original.

## Execution as a Deed

X \_\_\_\_\_  
Signature of authorised officer

Date:

X \_\_\_\_\_  
Signature of witness

Date:

Printed name of witness (any adult can be a witness)



# Authorisation by Applicant Under Section 10.1.32(1)(a)

*Gambling Regulation Act 2003*

## Who must complete this form?

This form must be completed for **all** entities requesting approval as an associated entity of an applicant for a venue operator's licence. Accordingly, if you ticked (a), (b), (c) or (d) in response to Q1, you **must** read the following important information and complete the form below. If you ticked (e) or (f) in response to Q1, indicating that you are seeking approval as a new associate of the holder of a current licence, you are **not** required to complete this form.

## Important Information

By completing this form, you will indicate your decision to authorise or not authorise the Victorian Gambling and Casino Control Commission (the VGCCC) and its staff to disclose the information outlined below. The VGCCC and its staff are bound by Division 6 of Part 1 of Chapter 10 of the *Gambling Regulation Act 2003*, which contains strict confidentiality provisions. Any protected information that is recorded in this document is subject to Division 6 of Part 1 of Chapter 10 of the Act and cannot be disseminated except in accordance with those provisions. A copy of the relevant sections of the Act is provided with this application. If endorsed, VGCCC staff will be authorised to advise the licence applicant (to which this request for approval relates) that information obtained by the VGCCC in relation to your associated entity form requires further assessment or investigation. The final determination of the licence application may be delayed pending the outcome of the assessment/investigation of your associated entity form.

Your endorsement of the following form **does not mean** you allow the release of any information or details contained in your associated entity form, or the release of any information obtained by the VGCCC in the course of its investigations. The **only** information provided to the licence applicant will be the fact that the application for such a licence will be delayed pending the outcome of the assessment/investigation of your associated entity form.

You do not have to authorise the release of this information. However, if you do not, it may significantly delay any application this associated entity form relates to. Indicate your decision to authorise or not to authorise the release of this information by choosing the appropriate choice in the below form. If you have any questions regarding this matter contact the VGCCC on telephone 1300 599 759 or email your enquiry at [contact@vgccc.vic.gov.au](mailto:contact@vgccc.vic.gov.au).

## AUTHORISATION BY ASSOCIATE

In accordance with section 10.1.32(1)(a) of the *Gambling Regulation Act 2003*,

### Associated entity details:

Name: \_\_\_\_\_ of \_\_\_\_\_  
(Full name of associate)

Address: \_\_\_\_\_ ('associate')  
(Full address of associate)

Authorised officer: \_\_\_\_\_  
(Full name of authorised officer signing the application on behalf of the associated entity)

## AUTHORISATION

The associate hereby

**AUTHORISES** or **DOES NOT AUTHORISE**

the VGCCC and its staff to inform the applicant to which this Associated Entity form relates that determination of the application may be delayed due to assessment of this form requiring further or additional investigation.

Signature of associate:

Date (dd/mm/yyyy):

\_\_\_\_\_

(Signature of authorised officer on behalf of the associated entity)

# Attachment page

**NOTE:**

This attachment page is provided for additional information that requires more space than that provided in the original question. Precede your entry with the question number and title to which the additional information relates.

Please copy if additional attachment pages are required.

Have you used an additional attachment page to provide any further information?

YES

NO

# Attachment 1 – Historical organisational extract

As part of this Associated Entity form, you must apply for the associated entity's Historical Organisational Extract which identifies the type, status, registered address, roles within the organisation, share structure, members, charges and documents lodged, (current and historical) of organisations registered with the Australian Securities and Investments Commission (ASIC).

When making a search application to ASIC, ensure that you specify that you require a Historical Organisational Extract and **not** a Current Organisational Extract. A Historical Organisational Extract identifies **both current and historical** information about the associated entity, while the Current Extract identifies only current information. If this Associated Entity form is lodged with an extract other than a Historical Organisational Extract, it will be considered incomplete and will be returned for re-lodgement when the correct extract has been obtained.

The associated entity's Historical Organisational Extract **must** be current at the time of lodgement of this form and not exceed three (3) months from the date of issue. If you fail to meet any of these requirements (i.e. you do not provide the associated entity's Historical Organisational Extract, or you enclose an extract exceeding three (3) months from the date of issue), the Associated Entity form will be considered incomplete and will be returned to you.

**All** matters detailed in the associated entity's Historical Organisational Extract are taken into consideration by the Victorian Gambling and Casino Control Commission. Should you wish to dispute any of the information disclosed in the associated entity's Historical Organisational Extract you should do so with ASIC prior to lodging the associated entity form.

## Fees

Fees are payable for searching ASIC databases. ASIC fees for on-line/telephone searches through brokers may differ from the fees charged at an ASIC business centre. Information brokers, however, may charge a service delivery fee in addition to the ASIC fee. The delivery fee may vary between brokers. ASIC does not regulate the amount of broker delivery fees.

ASIC can advise you of the cost of obtaining a Historical Organisational Extract.

## How to apply for your Historical Organisational Extract

A Historical Organisational Extract can be obtained from ASIC. You may also contact ASIC's Infoline or refer to the ASIC website to obtain details of regional ASIC Business Centres and ASIC representatives or information brokers.

## Contact details

Website: [asic.gov.au](http://asic.gov.au)

Email: [info.enquiries@asic.gov.au](mailto:info.enquiries@asic.gov.au)

ASIC's Infoline: 1300 300 630

# Attachment 2 – Associated Entity – Accountant or Auditor's Statement

*Gambling Regulation Act 2003*

## Background

In the matter of this application, and for the purposes of ongoing monitoring, Section 10.4A.1 of the *Gambling Regulation Act 2003* requires the Commission to consider whether an applicant is of 'sound and stable financial background'.

The following statement is to be completed by a Certified Practicing Accountant or Associate Chartered Accountant. This statement is provided for the sole purpose of assisting the Commission to assess an application made under the *Gambling Regulation Act 2003*.

Name of Associated Entity:

Name of accountant or auditor:

Accountant or auditor's address:

Qualification:      Certified Practicing Accountant      Chartered Accountant

I have considered all relevant documentation relating to the financial affairs of the above applicant. I am satisfied that at the time of making this statement, the applicant is able to pay its debts when and as they become due and payable.

Please specify below, or attach to this statement, any qualifications or explanations relating to the above statement that you wish to make.

Signature of accountant:

Date:

Printed name of signatory:

# Attachment 2(a) – Associated Entity – Summary of financial information

*Gambling Regulation Act 2003*

## Background

In lieu of providing an accountant or auditor's statement, the applicant can complete this section with the required summary of its financial information for the **three most recent completed financial years**. The applicant is advised to consult with its accountant or auditor to ensure that a true and correct summary of financial information is provided. The VGCCC may subsequently request audited financial statements be submitted in the event that this summary is found to be incomplete, incorrect or misleading.

The applicant must also ensure the solvency declaration at the end of this section is signed by each Director of the applicant. The solvency declaration requires each Director to declare that they have a reasonable belief that the company will be able to pay its debts as and when they become due and payable.

This solvency declaration will assist the Commission to consider whether the applicant is of sound and stable financial background for the purposes of the *Gambling Regulation Act 2003*.

Year ended

### Profit & Loss Statement

Total Sales/Revenue			
Less: Cost of Sales			

Gross Operating Profit			
Other Income (please specify)			

<b>Total Income</b>			
Less: Operating Expenditure			

<b>Net Profit/(Loss) before taxation</b>			
Less: Taxation Payable			

<b>Net Profit/(Loss) after taxation</b>			
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<b>Profit &amp; Loss Appropriation</b>			
Net Profit/(Loss) after taxation			
Retained Profits/(Losses) b/fwd			
Distribution to Beneficiaries			
Dividends declared/paid			
Others (please specify)			

<b>Retained Profits/(Losses) c/fwd</b>			
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Year ended

**Current Assets**

Cash & deposits			
Trade debtors			
Other debtors			
Inventories			
Amounts owing by related parties/entities			
Amounts owing by shareholders/unit-holders			
Others (please specify)			

<b>Total current assets</b>	<b>a</b>		
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<b>Non-current assets</b>			
Property, plant & equipment			
Intangible assets			
Amounts owing by related parties/entities			
Amounts owing by shareholders/unit-holders			
Others (please specify)			

<b>Total non-current assets</b>	<b>b</b>		
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<b>Total assets (a+b)</b>	<b>c</b>		
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**Current liabilities**

Bank overdraft & loans (secured)			
Trade creditors			
Sundry creditors			
Amounts owing by related parties/entities			
Amounts owing by shareholders/unit-holders			
Tax/GST liabilities			
Others (please specify)			

<b>Total current liabilities</b>	<b>d</b>		
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Year ended

**Non-current liabilities**

Bank overdraft & loans (secured)			
Amounts owing by related parties/entities			
Amounts owing by shareholders/unit-holders			
Provisions			
Others (please specify)			

<b>Total non- current liabilities</b>	e			
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<b>Total liabilities</b>	f			
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<b>Net assets (c-f)</b>	g			
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**Equity**

Issued capital/settlement sum			
Reserves			
Retained profits/(losses)			
Others (please specify)			

<b>Total equity</b>	h			
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Net assets **(g)** must be equal to total equity **(h)**

## Declaration by authorised officer

I, the authorised officer of the applicant declare and confirm that the attached audited financial statements or the summary of financial information provided are true and correct on the understanding that the applicant and myself are liable to prosecution for providing false and misleading information.

Name of authorised officer:

X  
Signature of authorised officer

Date:

## Directors declaration

The persons listed below declare that we are the Directors of the applicant and that we have enquired into the financial affairs of the applicant. We declare that we are satisfied that at the time of making this application, the applicant is able to pay its debts as and when they become due and payable.

Name of Director:

X  
Signature of Director

Date:

Name of Director:

X  
Signature of Director

Date:

Name of Director:

X  
Signature of Director

Date:

Name of Director:

X  
Signature of Director

Date:



# Attachment 3 – Business credit file

As part of this application form, the associated entity may apply to either illion or Equifax for a Business Credit File (Credit File) which will identify any matters entered against the associated entity by any financial provider.

The Credit File must be forwarded to the VGCCC with this application form. The Credit File must be no older than three (3) months at lodgement of the application. If the associated entity fails to meet any of these requirements or does not attach a Credit File, the application form will be considered incomplete.

**All** matters detailed in the Credit File are taken into consideration by the VGCCC and are essential to allow an assessment of the associated entity's financial resources. If the associated entity wishes to dispute any of the information disclosed in the Credit File, the provider of the Credit File must be contacted prior to the application form being lodged.

## HOW TO APPLY FOR A BUSINESS CREDIT FILE

### illion

To obtain your Credit Report from illion please visit [express.illion.com.au](https://express.illion.com.au) or alternatively, you may contact illion on 13 23 33 to arrange for its provision. Additional information may also be found at [illion.com.au](https://illion.com.au).

### Equifax

To obtain your Credit Report from Equifax, please visit [mycreditfile.com.au](https://mycreditfile.com.au) or alternatively, you may contact Equifax on 13 83 32 to arrange for its provision. Additional information may also be found at [mycreditfile.com.au](https://mycreditfile.com.au).