REPUBLIC OF NAMIBIA

CASINOS AND GAMBLING HOUSES ACT, 1994

APPLICATION IN TERMS OF SECTION 16(3) FOR THE PERMANENT/TEMPORARY
REMOVAL OF A CASINO LICENCE

The Secretary
Casino Board
Private Bag 13346
WINDHOEK

I hereby apply in terms of section 16(3) of the Casinos and Gambling Houses Act, 1994, for permanent/temporary removal of a casino licence.

SIGNATURE OF APPLICANT OR PERSON AUTHORISED TO SIGN APPLICATION

PLACE

DATE

* Delete whichever is not applicable

PARTICULARS OF APPLICANT

1. Full name of applicant

2. (a) Under what name is the casino conducted?

(b) (i) Will the name change as a result of the removal? (yes/no)

(ii) If so, state new name

3. (a) Describe the situation of the existing premises where the casino is conducted, with reference to the erf/farm number, street name and number, local authority area and magisterial district

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(b) Describe the situation of the new premises where the casino is to be conducted, with reference to the erf/farm number, street name and number, local authority area and magisterial district

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4. (a) Under what right will applicant occupy the premises referred to in paragraph 3(b)?

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(b) If not as owner, state the name and address of the owner and attach a certified copy of the agreement or other document disclosing the applicant’s right to occupy the premises

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5. (a) Is application made in respect of premises which -

   (i) have not yet been erected?

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   (ii) are already erected, but require additions or alterations to make them suitable for the purposes of the proposed business?

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   (iii) are already erected and, in the applicant’s opinion, do not require additions or alterations in order to make them suitable for such purposes?

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(b) If paragraph 5(a)(i) or (ii) applies state -

   (i) the date on which such erection, additions, or alterations will be commenced with

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   (ii) the period which will be required for the completion thereof

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6. In the case of an application for the temporary removal of a licence, state for what period such removal is desired

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ANNEXURES

List all documents attached to this application

I declare/affirm that the information furnished in this application and in the documents attached to it is true.

Date.................................................................

Signature of applicant or person authorised to sign.

I certify that this declaration has been signed and sworn to/affirmed before me at ........................................ this ............... day of ..................................... by the applicant/person authorised to sign the application who acknowledged that -

(a) he/she knows and understands the contents of this declaration;

(b) he/she has no objection to taking the prescribed oath/affirmation; and

(c) he/she considers the prescribed oath to be binding on his/her conscience,

and that he/she uttered the following words:

"I swear that the contents of this declaration are true, so help me God"./"I affirm that the contents of this declaration are true".

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Commissioner of Oaths

Full name ...........................................................................................................
Business address ............................................................................................... 
Designation ......................................................................................................... 
Area for which appointment is held .................................................................... 
Office held if appointment is ex officio..............................................................