FORM 4

REPUBLIC OF NAMIBIA

CASINOS AND GAMBLING HOUSES ACT, 1994

APPLICATION IN TERMS OF SECTION 16(2) FOR THE TRANSFER
OF A GAMBLING HOUSE LICENCE

The Secretary
Casino Board
Private Bag 13346
WINDHOEK

We hereby apply in terms of section 16(2) of the Casinos and Gambling Act, 1994 for the transfer of a gambling house licence from (holder of licence) .............................................................. to (proposed transferee) ..............................................................

SIGNATURE OF TRANSFEREE OR PERSON AUTHORISED TO SIGN APPLICATION

SIGNATURE OF HOLDER OF LICENCE OR PERSON AUTHORISED TO SIGN APPLICATION

PLACE

PLACE

DATE

DATE

PART A

INFORMATION RELATING TO THE HOLDER OF THE GAMBLING HOUSE LICENCE

1. Full name of applicant

........................................................................................................................................

2. Under what name is the gambling house conducted?

........................................................................................................................................

3. Describe the situation of the premises of the accommodation establishment/retail liquor business where the gambling house is conducted with reference to the erf/farm number, street name and number, local authority area and district

........................................................................................................................................

........................................................................................................................................

........................................................................................................................................
I declare/affirm that the information furnished in Part A and B of this application in so far as it relates to me/the applicant on whose behalf I am authorised to sign the application, is true.

Date .......................................................... Signature of the applicant who is the holder of the licence 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".

................................................
Commissioner of Oaths

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

PART B

INFORMATION RELATING TO APPLICANT WHO IS THE TRANSFEREE

1. (a) Full name of applicant

..............................................................................................................

(b) Date of birth if applicant is a natural person

..............................................................................................................

(c) Nationality if applicant is a natural person or in the case of a company or close corporation, its registration number

..............................................................................................................

(d) Postal address

..............................................................................................................
(e) Residential address or address of registered office
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

(f) Business address
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

(g) Telephone number
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

(h) Facsimile number
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

2. If applicant is a company, close corporation or partnership or any other form of body corporate or association of persons, state the name, date of birth, nationality and address of each shareholder, member or partner thereof and of the nature and extent of his or her financial interest in the applicant [If the applicant, or a company who has a financial interest in the applicant, is a public company it shall be sufficient if only the name, date of birth, nationality and address of each director thereof are furnished]
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

[Use an annexure if necessary]

3. (a) Is the applicant a person who -

(i) is an unrebilitated insolvent?
........................................................................................................................................................
........................................................................................................................................................

(ii) has at any time during the period of 10 years preceding this application, in Namibia or elsewhere, served a sentence of imprisonment for a period longer than 12 months for any offence without having been given the option of a fine in respect of such offence?
........................................................................................................................................................
........................................................................................................................................................

(iii) has at any time been convicted of an offence under the Casinos and Gambling Houses Act, 1994 (Act 42 of 1994) and within a period of 5 years after that conviction again been convicted for an offence under that Act?
........................................................................................................................................................
........................................................................................................................................................

(iv) is employed in the Public Service?
........................................................................................................................................................
........................................................................................................................................................

(v) is the spouse or a parent or child of a person contemplated in paragraphs (i), (ii), (iii) or (iv)?
........................................................................................................................................................
........................................................................................................................................................

[Answer yes or no]
(b) If the applicant is a company, close corporation or partnership, state whether any person contemplated in paragraph (a) -

(i) has a controlling interest in such company or close corporation

(ii) is a partner in such partnership

[Answer yes or no]

(c) If any of the questions in paragraphs (a) and (b) have been replied to in the affirmative, provide full details

[Use an annexure if necessary]

4. (a) Under what right will applicant occupy the premises referred to in paragraph 3 of Part A of the application?

(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

PARTICULARS OF GAMBLING HOUSE

5. Under what name is the gambling house to be conducted

6. Number and description of gambling machines which will be kept in the gambling house

7. (a) Will any prize exceeding N$10 000 in value be offered to be won through the playing of a gambling machine or any one of two or more gambling machines linked for such purpose?
(b) If the reply to paragraph (a) is "yes", give full details of the gambling machine or machines that will be used for such purpose, the method through which such prize can be won, and the maximum value of the prize that will be so offered.

8. Intended date of transfer of the gambling house licence

ANNEXURES

List all documents attached to this application

I declare/affirm that the information furnished in Part B of this application in so far as it relates to me/the applicant on whose behalf I am authorised to sign the 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".

Commissioner of Oaths

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

.........................................................