

FORM 7

THE REPUBLIC OF UGANDA

LOTTERIES AND GAMING ACT, 2016

APPLICATION POOL BETTING OPERATING LICENCE OR BINGO OPERATING LICENCE

Reg. 17



A-PARTICULARS OF THE APPLICANT

1. Name _____
2. Address _____
3. Nationality _____
4. Country of residence or principal place of business _____
5. Age of applicant (where the applicant is an individual) _____
6. National Identification Number or passport number in case of foreigners

7. Where the applicant is a company shall provide the following details:

| <i>Name of shareholder</i> | <i>Nationality</i> | <i>Age</i> | <i>Address (Physical or Postal)</i> |
|----------------------------|--------------------|------------|-------------------------------------|
| | | | |

B- PARTICULARS OF THE POOL BETTING FACILITIES OR BINGO OPERATING FACILITIES

8. Name under which the pool betting or bingo playing facility will be operated or established:

9. The pool betting or bingo playing facility will be located at
Principal place: _____

Plot No. and Street: _____

District _____

10. Description of the organisation and layout of premises where the pool betting or bingo playing facility will be operated or established. (attach the plans, diagrams and specifications of the layout of the premises)

11. List of categories and types of the machines or devices to be used in pool betting or bingo playing facility: (attach the diagrams or plan of the layout of the machines at the premises)

C- SUITABILITY OF THE APPLICANT

12. Have you or any of the persons named in this application been engaged in any other pool betting or gaming business, or any business involving the operation of gaming or betting?

Yes _____ No _____

If so, state –

(c) name of business _____

(d) the capacity in which you or the person named in this application was engaged _____

13. Have you or any of the person named in this application or any person employed or connected with your business ever been arrested or convicted for any offense or crime, even though subject of a pardoner, amnesty, or other similar action.

Yes _____ No _____

14. If yes, give particulars:

15. Have you applied for/been refused/been granted* any other licence under the Act or the Regulations or in any other jurisdiction:

Yes _____ No _____

If so, give particulars

Date atthis day of20.....

.....
(Signature)

+where the application is made for and on behalf of a partnership or a body corporate it must be signed by a partner or a person authorised to sign for the body corporate, as the case may be.

**Delete as necessary*