FORM 5

Reg. 10

Insert a pass port photo.

THE REPUBLIC OF UGANDA

THE LOTTERIES AND GAMING ACT, 2016

A-PARTICULARS OF THE APPLICANT

APPLICATION FOR A LICENCE TO ESTABLISH OR OPERATE A CASINO

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 Training details:								
Nan	ne of shareholder	Nationality	Age	Address (Physical or Postal)					
B- P.	ARTICULARS OF	THE CASINO	•	,					
8.	Name under which the casino will be operated or established:								
9.	The casino will be								
	Principal place:								

10.	The	class	of	casino	games	that	the	licence	will	relate	to:
11.	oper	ated or	estab	_	nisation (attach ti	_					
12.		_			achines of the layor						tach
C- S	 SUITAI	BILITY	OF	THE A	PPLICA	NT					
13.	Have in ar	Have you or any of the persons named in this application been engaged in any other casino business, or any business involving the operation of a gaming or betting?									
	Yes			N	O						
	If so	o, state	_								
	(a)	name	of b	usiness							
	(b)		•	•	nich you		•		l in this	s applica	ition

employed convicted	any of the persons named in this application or any per r connected with your business ever been arrested r any offense or crime, even though subject of a pardo other similar action.	or
Yes	No	
If yes, giv	particulars:	
•	applied for/been refused/been granted* any other lice or the Regulations or in any other jurisdiction:	nce
Yes	No	
If so, give	articulars	
Date at	this	
	(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