FORM 3

Reg. 7

THE REPUBLIC OF UGANDA

LOTTERIES AND GAMING ACT, 2016

APPLICATION FOR LICENCE TO CONDUCT A PUBLIC LOTTERY

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:

Name of shareholder	Nationality	Age	Address (Physical or Postal)

B—PARTICULARS OF THE LOTTERY

8. Name under which the public lottery will be conducted: _____

9. The Public Lottery will be conducted at-

    Principal place: _____

    Plot No. and Street:_____

    District_____

10. Describe the proposed public lottery including the mechanism of the lottery

_____
_____
_____

11. Districts of Uganda where the public lottery will be conducted:

_____
_____
_____

12. Describe the purposes for conducting a public lottery:

_____
_____
_____

C- SUITABILITY OF THE APPLICANT

13. Have you or any of the persons named in this application been engaged in any other public lottery business, or any business involving the operation of a lottery?

Yes _____ No_____

If so, state –

(a) name of business _____

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

(c) period when the lottery was conducted _____

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

Yes _____ No_____

14. If yes, give particulars:

_____
_____

15. What do you expect to be the amount of the gross turnover for the first six months of the public lottery in respect of which this application is made:

_____UGX

16. 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 at …………this ……………. day of ………………….20……...

……………………………………………………
(Signature)

+application should be filled in duplicate
+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