

Section 2. Change of Name

2. Please provide details of your new name and the reasons for the change.

Title

Date name changed

First name(s)

Surname

Reason for change in name (Please attach proof of the change, e.g. marriage certificate, deed poll)

Section 3. Change to sector

3. Please provide details of the changes required by crossing (x) the appropriate box(es).

Non-remote gambling

Add

Remove

Reason for change

Remote gambling

Add

Remove

Reason for change

Section 4. Change to individual condition attached to personal licence

4. Please write out in full the condition you wish to add. If you wish to change an existing condition, please write out the new or amended condition in full in the appropriate box. Where you wish to remove a condition please cross (X) the remove box. In all cases please state your reasons for requesting the change.

Condition

Add

Remove

Amend

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reason for change

Condition

Add

Remove

Amend

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reason for change

Condition

Add

Remove

Amend

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reason for change

Condition

Add

Remove

Amend

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Reason for change

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Section 5. Applicant's Declaration and Signature

- a) I certify that all the statements contained in, and attached to, this application for are correct and complete.
- b) I understand that the Gambling Commission may request a credit reference check and ask third parties for information about my professional qualifications and seek any other information of direct relevance to this application as necessary, including from appropriate authorities overseas. I give my consent to these checks being made.
- c) The Gambling Commission may require confirmation or further information from third parties in respect of any evidence or documentation I have provided in support of this application. I agree to grant authorisation for the Gambling Commission to request and receive information about me from those third parties.
- d) I understand that any misrepresentation or failure to reveal information or grant any authorisation requested may be considered sufficient cause for the refusal or revocation of a personal licence.
- e) I agree to comply with the licensing objectives, namely: to keep gambling crime free, to ensure that it is fair and open and to protect children and vulnerable people from being harmed or exploited.

By signing this declaration, I am agreeing to all of paragraphs a) to e).

The Gambling Commission is a data controller under the terms of the Data Protection Act 1998. The information provided on this form will be processed for the purposes necessary for the Commission to carry out its functions and meet its legal obligations. The data may be shared with third parties who fulfil a service on behalf of and under the express instructions of the Commission and other bodies where it is necessary to do so in order to carry out the Commission's functions and where the Commission is legally required or permitted to do so.

The Commission complies with the Criminal Records Bureau (CRB) and Disclosure Scotland Codes of Practice and undertakes not to discriminate unfairly against any subject of a disclosure on the basis of conviction or other information revealed. However, the existence of a conviction for a relevant offence listed in Schedule 7 of the Gambling Act 2005 is a ground on which the Commission may refuse a licence. The Commission's Policy Statement on the Handling of applications from Ex-Offenders is available on our website.

First name(s)

Surname

Signed

Date

D	D	M	M	Y	Y	Y	Y
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Section 6. Enclosures

Please indicate which enclosures have been attached: Please cross (X) box

One passport size photograph if you are returning this application as a hard copy; one image file (e.g. JPEG, GIF) if you are returning this application electronically. Note: If you are attaching a hard copy photograph, you must use the Photographic Identification Form which is part of the Personal Licence application form and is available on our website www.gamblingcommission.gov.uk or contact us on 0121 230 6666 to obtain this form. This is not necessary if you wish to keep the photograph currently on your licence.

The appropriate fee, if applicable (non refundable)

Proof of your change of name, if applicable

Your existing Personal Licence (if issued as a printed copy)

Note: Failure to provide enclosures will cause delay and may result in refusal of your application.

Any information or material sent to us and which we record may be subject to the Freedom of Information Act 2000. The Commission's policy on release of information is available on request or by reference to our website at www.gamblingcommission.gov.uk. The Commission will treat all information as confidential and will only disclose that information to people outside the Commission where it is necessary to do so in order to carry out the Commission's functions or where the Commission is required by law to disclose the information. Therefore when providing information, if you think that certain information may be exempt from disclosure under the Freedom of Information Act 2000, please annotate the form accordingly so that we may take your comments into account.

In addition, if your application is successful some of your details will be held on a public register. If any of the information on that register is inaccurate you have the right to have it corrected.

OFFICE USE ONLY Envelope ID	
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Section 7. Payment

Payment must be made by BACS transfer. The Commission's bank details can be found on our website:

<https://www.gamblingcommission.gov.uk/for-gambling-businesses/Apply-for-a-licence/Annual-fees.aspx>

When paying by BACS transfer, you must quote the licensee's account number and name with the payment details.

Payment by cheque is not accepted.

Please return this payment, together with your application form, to:

GAMBLING COMMISSION, VICTORIA SQUARE HOUSE, VICTORIA SQUARE, BIRMINGHAM, B2 4BP.