

# **Gaming Policy and Enforcement Branch**

# INFORMATION AND INSTRUCTIONS FOR APPLICANTS COMPLETING THE PERSONAL DISCLOSURE FORM (STANDARD)

#### WHO MUST COMPLETE THIS FORM?

This Personal Disclosure Form must be completed by:

1	Senior Officials of gaming services provider	3	Shareholders or investors with an investment of 5%
	companies (1)		or greater in gaming services provider companies
2	Senior Employees of gaming services provider as	4	Partners or associates of a gaming services
	deemed by GPEB		provider

<sup>(1)</sup> Senior officials are comprised of each of the 5 highest paid officers and each individual who, whether or not among the 5 highest paid officers is the chair or vice chair of the board of directors, president, vice president, secretary, treasurer or general manager; or any individual who performs similar functions.

NOTE: The Gaming Policy and Enforcement Branch (GPEB) reserves the right to require any additional disclosure from an applicant or the associate of an applicant that it considers necessary to conduct a thorough background investigation in keeping with GPEB's mandate to ensure the integrity of gaming and horse racing.

#### WHAT ARE THE COSTS?

REGISTRATION CLASS	APPLICATION FEE * and ANNUAL REGISTRATION FEE**
Senior Official or Senior Employee	\$ 250.00

<sup>\*</sup>The **Application Fee** is required to initiate a new or renewal application.

<u>Costs of Background Investigations</u> are required to cover the costs of any background investigation, including but not limited to the cost of GPEB staff time @ \$150 per hour (per person), out-of-province travel costs, and where it is deemed necessary, the engagement of specialized financial, management, or investigation advisory services. Any other costs incurred in connection with the disclosure shall be the applicant's responsibility.

Payment methods: Wire transfers, money orders or company cheques are accepted.

- Wire transfers- please contact gaming.registration@gov.bc.ca for instructions and banking details.
- Alternate Payment Methods: If paying by money order or cheque, please make it payable to the "Minister of Finance" in Canadian funds. Do NOT submit cash.
- Additional funds may be required to cover any special investigation, auditing or administrative costs considered
  necessary by GPEB to ensure a thorough and complete background investigation of the applicant or registrant.

#### WHERE CAN I GET MORE INFORMATION?

Additional registration information is available on GPEB Website.

#### WHAT IF I HAVE FURTHER QUESTIONS?

If you have additional questions about the disclosure documents or the registration process, contact the Licensing, Certification and Registration Division at (250) 356-0663 or by email at <a href="mailto:qaming.registration@gov.bc.ca">qaming.registration@gov.bc.ca</a>.

#### **RESPONSES**

**Print or type your responses.** Answer all questions fully and truthfully. If a question does not apply to you, state "*Not Applicable*" or "*N/A*". If more space is required or if the requested information exists in another format, cross reference the attachment to the relevant question.

**Read each question carefully.** Submitting the application gives GPEB authority to investigate your answers. If you do not fully disclose, if you leave out any important information or if your answers are not correct, your application may be denied.

If it is determined after you have been registered that your answers on this application were false, incomplete, or misleading, or if you fail to notify GPEB of any material change to this information which occurs after the application has been filed, your registration may be cancelled by GPEB. If necessary, an applicant will be required to provide fingerprints to verify whether or not they have a criminal record.

<sup>\*\*</sup>The <u>Annual Registration Fee</u> is a yearly fee equal to the application fee paid by the applicant and is required to maintain registration. It must be submitted to GPEB each year on or before the registration anniversary date (usually the date registration was approved by GPEB) for the term of registration.

You are seeking the granting of a privilege and the burden of proving suitability for a favourable determination is at all times on you. You must accept any risk of adverse publicity, embarrassment, criticism or other action, or financial loss, which may result from action with respect to an application, and expressly waive any claim for damages as a result thereof.

**After completing the forms**, ensure you have signed all required forms and have included the application fee and photograph. **Retain a copy of your application and all submitted documents for your records.** Be prepared to bring a copy of this completed disclosure to any personal interviews that are conducted.

#### IDENTIFICATION REQUIREMENT

You must submit with your application a scanned colour copy of a **valid** government-issued ID that includes your full legal name, date of birth, signature, and photograph, such as a driver's licence or passport.

#### WHERE DO I SEND THE COMPLETED FORMS AND FEES?

The Disclosure Form and supporting documents are to be submitted electronically, on a flash drive, or via a file-sharing service. To submit the disclosure form(s) and supporting documents using GPEB's FTPS site, contact the Corporate Registration Unit at gaming.registration@gov.bc.ca and request a temporary FTPS account.

Should the disclosure forms and supporting documents be submitted as physical copies, applicants/registrants will be charged \$150/hour for the time GPEB staff spend on scanning the documentation.

Documents should be in English. If any document is in a language other than English, the applicant should provide GPEB with a copy of the original document as well as an English version translated by a certified translator.

Attachments should be properly named and provided as separate files per the Attachment Checklist included in the disclosure. Not respecting the naming convention and/or submitting the documentation as a single file will create additional delays and costs in processing the application.

The disclosure submission, flash drive (if applicable) and/or registration fee payment are to be sent to:

#### MAIL/COURIER:

Gaming Policy and Enforcement Branch
Corporate Registration Unit
220 - 4370 Dominion Street Burnaby BC V5G 4L7

#### WHAT HAPPENS ONCE I SUBMIT MY APPLICATION?

All information and documents provided as part of the disclosure become the property of GPEB and will not be returned. An application may not be withdrawn without the written permission of GPEB. Application fees are not refundable.

Expect a GPEB investigator to contact you. You may be required to provide other information in addition to what is requested in this application package.

Successful applicants will receive a letter of registration from the Director of Corporate Registration. Unsuccessful applicants will receive the reason(s) for the denial in writing from the Director of Corporate Registration.

#### **CHANGE OF INFORMATION**

If any of the information supplied changes after you have submitted this disclosure form, you must immediately submit the changes in writing to gaming.registration@gov.bc.ca.

#### HOW WILL THE INFORMATION IN THE APPLICATION BE USED?

Except as provided in the *Consent to Release of Personal Information* form, all information provided in this application, including attachments and supporting documents, shall be kept confidential in accordance with the *Freedom of Information and Protection of Privacy Act (BC)*.

You may direct questions about the collection and use of this information by email (<a href="mailto:gaming.registration@gov.bc.ca">gov.bc.ca</a>) to the Director of Corporate Registration, GPEB.

# **CONFIDENTIAL**

GPEB USE ONLY					
Date Received:					
CREG File:	GBC ID:	Application #:			

# PERSONAL DISCLOSURE FORM (STANDARD)



# GAMING POLICY AND ENFORCEMENT BRANCH LICENSING, REGISTRATION AND CERTIFICATION DIVISION

Employer or Company Representing Gaming Site:	
Name of Applicant:	
Company Position:	
Current Registration Expiry Date: (dd-mmm-yyyy) (if applicable, otherwise n/a)	N/A
Date Application Completed: (dd-mmm-yyyy)	
Application for: (check ALL boxes that apply)	Senior Official of applicant company Senior Employee of applicant company Shareholder or investor with an investment of 5% or greater in applicant company Other, as deemed by GPEB. Specify:

1. PERSONAL INFORMATION					
Last Name	First Name		Middle Nam	ne(s)	
Alias, Nicknames, Maiden Name, Other Nam	 ne Changes (Legal or Otherw	vise) [	Date of Birth	Gender:	
			(dd-mmm-yyyy)		
Place of Birth		L	(00 , , , , , , ,	1	
City	Province/State	Cour	itry	Citizenship	
Do you hold dual citizenship?				•	
☐ No ☐ Yes, in the following country	y/countries:				
Contact Details					
Home Telephone # Persona	ıl Cell #	W	ork Telephone #	Work Cell #	
Personal Email		Work Email:			
Identification					
SIN/SSN or National ID # (Optional)	Driver's Licence # (Province	e/State) Pa	ssport Number(s) (	(Country)	
Marital Status		L			
☐ Single ☐ Married ☐ Com	mon Law 🔲 Co-hab	itating [	Separated	☐ Divorced	☐ Widowed
If you are currently married, common law or co-h	abitating, provide full name of	spouse/partner	Dat	te of marriage/commor	n law/co-habitating
				-mmm-yyyy)	
If you are currently or previously separated, divo	ced or widowed, provide full na	ame(s) of former	spouse Da	te of marriage/divorce,	/separation/death
			(dd-	-mmm-yyyy)	
Identification Requirements: (incl You must submit a scanned colour co birth, signature and photograph, such	py of a valid governmer		that includes y	our full legal nam	ne, date of
2. RESPONSIBILITIES					
Describe your involvement in the appreciate required, include as <b>Attachment 2</b> .	plicant company and yo	our current i	responsibilities	s. If additional spa	ace is

3. RESIDENCE INFORMATION							
Provide the following information current address. If additional sp					(10) years includir	ng your	
Ant/Suite Street Number Street Nam	t/Suite, Street Number, Street Name, City, Province/State,				Dates		
Postal/Zip Code	e, city, Frovince/Sta	ite,	Owr	n/Rent	From (dd-mmm-yyyy)	<b>To</b> (dd-mmm-yyyy)	
4. FINANCIAL DEPENDANTS							
Provide the following information	on for all financia	I dependan	ts. If addition	nal space is rec	uired, include as a	Attachment 4.	
Full Name		Birth Date (dd-mmm-yyyy)	Relationship (ie.child, sibling)	Address	<u>'</u>		
		X 77777	, , , , , , , , , , , , , , , , , , ,				
	I.			1			

5. EMPLOYMENT INFORMATION							
Provide all employment information for the past five (5) years, regardless of industry, starting with your current							
required, include a	ion, list any employment in the gaming as <b>Attachment 5</b> .	ig industry	since the age of 18. If add	ditional space is			
1. From (dd-mmm-yyyy)	Current Employer		Business Phone				
				Is the company involved in the Gaming Industry?			
To (dd-mmm-yyyy)	Mailing Address			☐ Yes			
				□ No			
Position Held	Description of Duties	Supervisor	Name/Contact Information	Reason for Leaving			
2. From (dd-mmm-yyyy)	Employer	•	Business Phone				
				Is the company involved in the Gaming Industry?			
To (dd-mmm-yyyy)	Mailing Address			☐ Yes			
				□ No			
Position Held	Description of Duties	Supervisor	Name/Contact Information	Reason for Leaving			
3. From (dd-mmm-yyyy)	Employer		Business Phone	La Alice and a second s			
				Is the company involved in the Gaming Industry?			
To (dd-mmm-yyyy)	Mailing Address			□ Yes			
				□ No			
Position Held	Description of Duties	Supervisor	Name/Contact Information	Reason for Leaving			
4. From (dd-mmm-yyyy)	Employer		Business Phone				
				Is the company involved in the Gaming Industry?			
To (dd-mmm-yyyy)	Mailing Address			□ Yes			
				□ No			
Position Held	Description of Duties	Supervisor	Name/Contact Information	Reason for Leaving			
5. From (dd-mmm-yyyy)	Employer	•	Business Phone				
				Is the company involved in the Gaming Industry?			
To (dd-mmm-yyyy)	Mailing Address			☐ Yes			
				□ No			
Position Held	Description of Duties	Supervisor	Name/Contact Information	Reason for Leaving			

6. EMPLOYMENT DISCHARGE / SUSPENSION / RESIGNATION / DISCIPLINARY ACTION						
Have you ever been discharged, suspended, asked to resign from employment or disciplined in any manner?						
<ul><li>i. Employer's name ar</li><li>ii. Name of supervisor,</li><li>iii. Date of discharge, re</li><li>iv. Circumstances for d</li></ul>	/person who initia esignation, suspen	sion or disciplinary		ary action	1	
7. CORPORATE ASSOCIATIONS						
Provide the following information for limited liability companies) that you director, shareholder, trustee, bene which you own less than 5% of the igambling during your term of associated the state of the igambling during your term of the igambling during your term of associated the state of the state o	have been involve ficiary, or any simi ssued and outstan	ed within the past lar position. Do no ding shares. Indica	10 years, ot include ate if the	in any o any pub entity wa	f the following roles: licly traded corporat as involved with licer	officer, ions in ised
Name and Address of Entity (Street, City, Province/State, Postal/Zip Code, Telephone Number)	Company Description	Position Held		tes m-yyyy) To	Reference Person	Gaming? Yes or No
1.						
2.						
3.						
8. POSITIONS OF TRUST						
Have you ever resigned, been removed or discharged from a position of trust - such as a trustee, board member, officer, director or equivalent?  □ No □ Yes → If YES, you MUST include the following information as <b>Attachment 8</b> .  i. Name and address of entity ii. Position held iii. Date of resignation, removal, or discharge iv. Reason(s)						

## 9. POST SECONDARY EDUCATION AND PROFESSIONAL DESIGNATION(S)

If additional space is required, include as **Attachment 9**. Proof of education may be required.

	Name of Institution	Location	Dates Attended (mm-yyyy to mm-yyyy)	Degree or professional designation Attained
College or University	1.			
	2.			
Other	1.			
	2.			
Professional Designation(s)	1.			
	2.			
	3.			

#### 10. CRIMINAL, STATUTORY AND REGULATORY MATTERS

Have you ever been, or has any business entity, within the past ten (10) years, in which you own(ed) 10% or more, or in which you currently serve or have served as an officer or director been:

A. subject to any criminal investigation in any jurisdiction?

No

Yes → If YES, you MUST include the following information for EACH investigation as **Attachment 10A**:

- i. Name and address of entity (if applicable)
- ii. Reason for investigation
- iii. Name and address of organization conducting investigation
- B. charged with an offence in any jurisdiction? Includes outstanding charges, absolute discharges and stays of proceeding in any jurisdiction.

No

Yes → If YES, you MUST include the following information for EACH charge as **Attachment 10B**:

- i. Name and address of entity (if applicable)
- ii. Description of charge
- iii. )
- v. C
- C. found guilty or convicted of an offence in any jurisdiction? (This includes convictions / charges where an absolute or conditional discharge or a pardon was granted.)

Νo

Yes  $\rightarrow$  If YES, you MUST include the following information for EACH charge as **Attachment 10C**:

- i. Name and address of entity (if applicable)
- ii. Description of conviction or finding of guilt
- iii. Date of conviction or finding of guilt
- iv. Description of sentence
- v. Name and address of Court
- vi. Court file number

#### 11. LAWSUITS, CLAIMS AND HEARINGS

A. In the last ten (10) years, have you, or any business entity in which you own(ed) 10% or more, or currently serve or have served as an officer or director, **been subject to a lawsuit** or a claim, disciplinary hearings, or similar proceeding in any jurisdiction? Include orders, judgments, fines, pending dispositions, and penalties imposed.

Nο

Yes → If YES, you MUST include the following information for EACH proceeding as **Attachment 11A**:

- i. Description of lawsuit or claim
- ii. Name of all other parties to the lawsuit or claim
- iii. Outcome
- iv. Initial date of proceeding
- v. Name and address of Court
- vi. Court file number
- B. In the last ten (10) years, have you, or any business entity in which you own(ed) 10% or more, or currently serve or have served as an officer or director, **ever commenced a claim or lawsuit** in any jurisdiction?

No

Yes → If YES, you MUST include the following information for EACH proceeding as **Attachment 11B**:

- i. Description of claim
- ii. Name of all other parties to the proceeding
- iii. Outcome of proceeding
- iv. Initial date of proceeding

## 12. CONSUMER PROPOSALS, BANKRUPTCY AND CREDITOR PROTECTION

In the last ten (10) years have you, or any business entity in which you own(ed) 10% or more, or in which you currently serve or have served as an officer or director, in any jurisdiction:

- participated in credit counselling or debt management / debt restructuring;
- received any loan or debt forgiveness;
- filed for bankruptcy protection or receivership;
- been petitioned into bankruptcy or receivership;
- made a proposal under any bankruptcy insolvency or similar law or had any similar action taken against you been denied or refused bankruptcy protection or reorganization under any bankruptcy or insolvency law?

No

Yes  $\rightarrow$  If YES, you MUST include the following information for EACH proceeding as **Attachment 12**:

- i. Name and address of entity (if applicable)
- ii. Name and address of filing party
- iii. Date petition filed
- iv. Name and address of Court
- v. Name and address of trustee
- vi. Disposition or outcome

#### 13. GAMING APPLICATIONS, LICENSURE AND REGISTRATION

In the last ten (10) years have you, or any business entity in which you own(ed) 10% or more, or in which you currently serve or have served as an officer or director:

A. applied for any permit, licence, certificate or registration in connection with gaming in any jurisdiction?

No

Yes  $\rightarrow$  If YES, you MUST include the following information as **Attachment 13A**:

- i. Name and address of business entity
- ii. Name and address of licensing or regulatory body
- iii. Type of permit, licence, certificate, registration
- iv. Date of application
- v. Disposition of application (e.g. approved, abandoned or withdrawn)
- vi. Name and contact information of regulatory personnel assigned to your file
- B. had a permit, licence, certificate or registration in connection with gaming denied, suspended or cancelled in any jurisdiction?

No

Yes → If YES, you MUST include the following information as **Attachment 13B**:

- i. Name and address of business entity
- ii. Name and address of licensing or regulatory body
- iii. Type of permit, licence, certificate, registration
- iv. Action taken (e.g. refused, denied, suspended, cancelled, or disciplined)
- v. Date action taken
- vi. Reason(s)
- C. had any administrative sanctions taken, disciplinary hearings, fines and penalties imposed by a gaming regulator?

No

Yes  $\rightarrow$  If YES, you MUST include the following information as **Attachment 13C**:

- i. Name and address of business entity
- ii. Name and address of licensing or regulatory body
- iii. Type of permit, licence, certificate, registration
- iv. Action taken (e.g. refused, denied, suspended, cancelled, or disciplined)
- v. Date action taken
- vi. Reason(s)
- D. had a permit, licence, certificate or registration denied, suspended or cancelled by a regulatory body or authority exercising jurisdiction over specific business activities or professions? **Note:** This includes any act under Federal, Provincial and State jurisdictions (e.g. driver's licence, professional membership/certification).

No

Yes  $\rightarrow$  If YES, you MUST include the following information as **Attachment 13D**:

- i. Name and address of entity
- ii. Name and address of licensing or regulatory body
- iii. Type of permit, licence, certificate, registration
- iv. Action taken (e.g. refused, denied, suspended, cancelled, or disciplined)
- v. Date action taken
- vi. Reason(s)
- E. had any administrative sanctions, fines and/or penalties imposed? **Note:** This includes any act under Federal, Provincial and State jurisdictions (e.g. driver's licence, professional membership/certification).

No

Yes → If YES, you MUST include the following information as **Attachment 13E**:

- i. Name and address of entity
- ii. Name and address of licensing or regulatory body
- iii. Type of permit, licence, certificate, registration
- iv. Action taken (e.g., administrative sanctions, fines, penalties, or disciplinary hearings)
- v. Date action taken
- vi. Reason(s)

F.	been connected to or engaged in an	way with illegal or unlicensed gambling or gaming enterprise?
	No	ude the fellowing information of Attachment 125.
	i. Name and address of e	ude the following information as <b>Attachment 13F:</b> mployer or associate
	ii. Date of association	imployer of associate
	iii. Type of gaming activity	
	<ul><li>iv. Date and location of ga</li><li>v. Explain the circumstan</li></ul>	<del>-</del>
	•	
G.	had any relatives associated with or No	employed in the gambling or gaming industry?
		ude the following information as Attachment 13G:
	i. Name of relative	
	ii. Relationship to relative	
14.	GAMING INVESTMENTS	
A.		you own or control) provide funds, assign assets or make an investment in the ce is required, include as <b>Attachment 14A</b> .
	No	
	·	unt and type of investment and complete 14B.
	☐ Total Amount:	\$
	Type of Investment:	
	☐ Shareholder Loan	\$
	☐ Purchase of Shares	\$
	☐ Asset Transfer	\$
	☐ Other (Specify)	\$Specification:
В.	Investment in the applicant company required, include as <i>Attachment 14B</i>	y has or will be derived from the following sources (if additional space is ):
	Source:	Amount: \$
	Source:	Amount: \$
	Source:	Amount: \$
	( <b>NOTE</b> : Evidence of the source of	f funds must be readily available upon request.)
C.	In the last ten (10) years, have you o company?	any family member received a loan of any kind from the applicant
	No	
	Yes → If YES, provide (below been repaid or as <b>Attachme</b>	v) the amount, reason for the loan, and whether or not it has ent 14C.
	Amount of Loan:	Loan Repaid ? Yes No
	Reason for Loan:	

you (or your h					are equivalent) held by clude as Attachment 14D			
Number of Shares Held	Share Class (i.e. A, B, C)	Share Type: (ie. Common (CS) / Preferred (PS)	Voting (V) / Non-Voting (NV)	Par Value	% Ownership in Applicant Company			
an interest will No	be assigned, pledg	old an interest in the ged, or sold, either in details as <b>Attachme</b>	whole or in part?	OR entered into a	n agreement whereby			
	•		estrictions under an	y agreement?				
No Yes →	· If YES, provide a c	opy of the agreemer	nt as <b>Attachment 14</b>	F.				
. Do you hold ar No	ny other gaming inv	estments?						
Yes →	If YES, provide a comment 14G.	opy of the agreemen	t or provide key deta	ails if an agreeme	nt does not exist as			

<b>.</b> 5.	REPOR	TING OF INCOME AND TAX FILINGS / RETURNS	
A		e year and location for which you last filed an income tax return. ( <b>NOTE</b> : If you filed in multiple jurisdictite the year and location for each jurisdiction you filed):	ons,
	For th	ne year, filed in,,	
		City, Province or State Country	
B.	•	epares your tax submission and how are they filed? ( <b>NOTE</b> : If you filed in multiple jurisdictions, indicate d your tax submission and filing method for each jurisdiction.) Include this information as <b>Attachment 1</b>	
	Firm:	Address:	
	Meth	od of Filing:	
C.	filed and	copies of your completed income tax returns for the last three (3) years for any jurisdiction where you had include as <b>Attachment 15C</b> (submissions must include complete forms and schedules and must be in . (NOTE: If applicable, tax returns for your holding company must be available upon request.)	ave
D.		copies of your Notice of Assessment, Statement of Account, or equivalent, from the Income Tax Authorit ast three (3) years and include as <b>Attachment 15D</b> (submissions must be in English).	У
Ε.		st ten (10) years have you, or any business entity in which you own(ed) 10% or more or in which you y serve or have served as an officer or director:	
	i.	failed to disclose or report income?	
		No Yes → If YES, provide the circumstances regarding the nature of the income and the amount as Attachment 15E.i.	
	ii.	made false claims or tax submissions? No	
		Yes $\rightarrow$ If YES, provide the circumstances regarding the nature of the false claim and the amount as <b>Attachment 15E.ii</b> .	
	iii.	been audited or investigated by a tax authority?  No	
		Yes → If YES, provide the circumstances regarding the audit or investigation including date, outcome and the amount as <b>Attachment 15E.iii</b> .	
	iv.	been subject to any tax fines or penalties? No	
		Yes $\rightarrow$ If YES, provide the circumstances regarding the fine or penalties and if the debt has been paid as <b>Attachment 15E.iv</b> .	ł
	V.	been denied an extension for filing a tax submission?  No	
		Yes $\rightarrow$ If YES, provide the circumstances regarding the denial as <b>Attachment 15E.v</b> .	
	vi.	been in a VDP ("Voluntary Disclosure Program") or equivalent with the Canadian Revenue Agency or another tax authority?  No	
		Yes $\Rightarrow$ If YES, provide the circumstances regarding the program including the date of completion and outcome as <b>Attachment 15E.vi</b> .	

# 16. COURT ORDERS AND GARNISHMENTS In the last ten (10) years have you, or any business entity in which you own(ed) 10% or more or in which you currently serve or have served as an officer or director: A. ever had a credit card revoked? i. No ii. Yes → If YES, you MUST include the following for EACH proceeding as Attachment 16A. i. Name of credit card company ii. Date credit card revoked iii. Reason why it was revoked iv. Outstanding balance and current status been subject to garnishment, assignment, or other similar orders in any jurisdiction? No Yes → If YES, you MUST include the following for EACH proceeding as ° Nature and amount of obligation "Name and address of the holder of obligation Name and address of Court 'Court file number' C. at any time disobeyed any Court Order requiring you to do, or abstain from doing, any act? Yes → If YES, you MUST include the following for EACH proceeding as Attachment 16C. i. Date and nature of the Court Order ii. Name and address of Court iii. Reason for not obeying order iv. Court file number v. Current status D. been subject to any court ordered child support or spousal support agreement that is still in effect? Yes → If YES, are you currently up-to-date on support owed? Yes -> If YES, you MUST provide evidence that you are up-to-date as Attachment 16D. DI. had any assets seized for non-payment, default, or any other action taken to collect an account that was owed?

Yes → If YES, you MUST include the following for EACH proceeding as **Attachment 16E**.

- i. Name and address of entity who initiated action
- ii. Date of action
- iii. Description of asset seized
- iv. Current status of action

# 17. ASSETS / LIABILITIES

- A. In the last ten (10) years have you, or any business entity in which you own(ed) 10% or more or in which you currently serve or have served as an officer or director (other than the applicant company):
  - i. held assets or liabilities outside of your country of permanent residence?

No

- Yes → If YES, identify the assets and/or liabilities and their value as **Attachment 17A.i**.
- ii. been the signatory (as trustee, beneficiary or settlor) on any trust or other estate planning instrument?

No

Yes  $\rightarrow$  If YES, describe your role and the nature of the instrument as **Attachment 17A.ii**.

B. List below all instances in the last five (5) years where you have given a guarantee, co-signed or otherwise insured payment of a loan, debt or other financial obligation.

Name & Address of Creditor	Date Incurred (mm/yyyy)	Amount	Unpaid Balance	Maturity Date (mm/yyyy)	Amortization Period (mm/yyyy - mm/yyyy)	Person Liable and Relationship
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			

## 18. INCOME

A. List all sources of **household income** and their amounts **received directly from the applicant company** (Include all employment remuneration, bonuses, management and consultant fees, royalties, stock options, dividends, company vehicles, etc.). If additional space is required, include as *Attachment 18A*.

Source of Income	Estimate Amount for Current Calendar Year	Estimate Amount for Previous Calendar Year
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total estimated annual gross income	\$	\$

B. List all sources of **household income** and their amounts **from sources other than the applicant company**. Include all businesses, rental property, management and consultant fees, royalties, interest income, dividends, etc.) If additional space is required, include as *Attachment 18B*.

Source of Income	Estimate Amount for Current Calendar Year	Estimate Amount for Previous Calendar Year
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total estimated annual gross income	\$	\$

19. STATEMENT OF ASSETS AND LIA	ABILITIES				
All information provided in this section  A. Complete the following <b>Statements</b> following pages and the total amou	s. Each entr	y must be d	lescribed fully on the a	• • •	 found on the
Statement of Assets	Schedule	% of ownership	Amount Canadian Dollars	Foreign Currency	
Cash on hand (if in excess of \$10,000 CDN)		OWNERSING	\$	Foreign Currency Value	Exchange Rate
Deposits at Financial Institutions			\$	\$	
Accounts and Notes Receivable	Α		\$	\$	
Brokerage and Investment Accounts	В		\$	\$	
Business Investments	С		\$	\$	
Real Estate	D		\$	\$	
Personal Vehicles	E		\$	\$	
Other Assets	F		\$	\$	
TOTAL ASSETS			\$	\$	
Statement of Liabilities	Schedule	% of ownership	Amount (Canadian Dollars)	Curren Converted From	Cy Exchange Rate
Current, Long Term and Other Liabilities (debts due and payable)	G		\$	\$	
Mortgages Payable	н		\$	\$	
Accounts Payable (credit cards, line of credit, etc.)	ı		\$	\$	
TOTAL LIABILITIES			\$	\$	
Statement of Net Worth			Amount (	Canadian Dollars)	
Total Assets (from Statement of Assets abov	re)		\$		
Less: Total Liabilities (from Statement of Liab	oilities above	<u>e)</u>	\$		
	NE	T WORTH	\$		

☐ Not Applicable						
Name and Address of Debtor	Date Incurred (dd-mmm-yyyy)	Original Amount	Unpaid Balance	Interest Rate	Maturity Date (dd-mmm-yyyy)	Collateral
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			

List all loans and notes receivable held by you. If additional space is required or this information exists in another format, attach it as **Schedule A**.

SCHEDULE A – ACCOUNTS AND NOTES RECEIVABLE

#### SCHEDULE B – BROKERAGE AND INVESTMENT ACCOUNTS

List the requested information for all stocks, bonds, and convertible securities held or controlled by you. You are not required to identify stocks held through mutual funds, holding companies, or institutional investors. Whenever such interest exists through a beneficial interest in a trust, the stocks and bonds held in such trust shall be listed if you have knowledge of what stocks and bonds are so held. Indicate publicly traded stocks and bonds with an asterisk (\*) and attach the investment/brokerage statement of account. If additional space is required or this information exists in another format, attach it as *Schedule B*.

☐ Not Applicable
------------------

Name and Address of Issuer	Туре	Number of Shares or Units	Purchase Price	Name in Which Held	Current Market Value
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$
			\$		\$

C	CL	<b>IED</b>	ш		$\mathbf{c}$	. RII	CIN	IECC	INI	/ECT	IMEN	JTC.
.3	СΓ	166	U	LE.	<b>L</b> –	· DU	ЭШ	NESS	114	VESI	IVIEI	

List all investments where an interest (direct, indirect, vested, or contingent) is held by you, along with the names of all individuals or entities who share an interest therein. This includes but not be limited to joint ventures, partnerships, sole proprietorships, and corporations. If additional space is required or this information exists in another format, attach it as *Schedule C*.

☐ Not Applicable

Entity Name	Number of Shares or Units	% of Ownership	Purchase Price	Purchase Date (dd-mmm-yyyy	Individuals or Entities Sharing an Interest or Ownership %	Current Market Value
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$

#### **SCHEDULE D – REAL ESTATE**

List details of any real estate (property) where you have any kind of ownership or interest, including both legal and beneficial ownership. Include the names of any other people or companies that also share ownership or interest. Mark any property that earns income with an asterisk (\*). If additional space is required or this information exists in another format, attach it as **Schedule D**.

Description, Address and Purpose of Property	Purchase Price/ Improvements at Cost	Purchase Date (dd-mmm-yyyy)	Ownership %	Name of Owner(s)	Mortgage Balance	Current Market Value
	\$				\$	\$
	\$				\$	\$
	\$				\$	\$
	\$				\$	\$
	\$				\$	\$

□ Not Applicable				
Type of Asset	Year and Make	Jurisdiction of Registration	Registered Owner or Leasing Company	Current Market Value
				\$
				\$
				\$
				\$
				\$

List all motor vehicles, boats, and planes owned (or leased) by you. If additional space is required or this information exists in another format, attach it as

# **SCHEDULE F – OTHER ASSETS**

**SCHEDULE E – PERSONAL VEHICLES** 

List all other assets, including but not limited to personal property, cash surrender value of insurance policies, pension plans, etc. held by you. If additional space is required or this information exists in another format, attach it as *Schedule F*.

Type of Asset	Owned by	Purchase Price	Purchase Date (dd-mmm-yyyy)	Current Market Value
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

List all current and long term lia	bilities held by you.	. If additional sរុ	pace is required (	or this informatio	on exists in anoth	er format, atta	ch it as <b>Schedule G</b> .
□ Not Applicable							
Name and Address of Creditor	Debtor	Date Incurred (dd-mmm-yyyy)	Original Amount	Payment Period	Unpaid Balance	Maturity Date (dd-mmm-yyyy	Purpose and Collateral
			\$		\$		
			\$		\$		
			\$		\$		

\$

\$

## **SCHEDULE H - MORTGAGES PAYABLE**

SCHEDULE G – CURRENT, LONG TERM AND OTHER LIABILITIES

List all mortgages or liens payable on real estate held by you. If additional space is required or this information exists in another format, attach it as **Schedule H** 

\$

\$

Name and Address of Mortgage Lender	Borrower(s)	Date Incurred (dd-mmm-yyyy)	Original Amount	Amortization Period	Amount Outstanding	Description and Address of Real Estate
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

SC	HEDU	II F I	- AC	COUN	TS PA	AYABLE

List accounts payable (credit card, line of credit, etc.) held by you. If additional space is required or this information exists in another format, attach it as **Schedule I**.

Name and Address of Creditor	Borrower(s)	Date Incurred (dd-mmm-yyyy)	Original Amount	Amortization/ Revolving Period	Amount Outstanding	Description of Debt
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

#### CONSENT RESPECTING PERSONAL INFORMATION

l <u>,</u>	, consent to the Gaming Policy and Enforcement Branch pursuant to
Part 7 and 8 of the <i>Gaming Control Act</i> to:	

- 1) Disclose my personal information to the organizations including but not limited to those listed below for the purpose of verifying identity prior to additional collection of personal information.
- 2) Collect additional information pertaining to my application for registration for the purpose of verification of the information provided on this form and to determine suitability for gaming registration and the suitability for corporate registration of the entity with which I am employed, involved, or affiliated.
- 3) Collect additional information from any financial organization, including but not limited to the following domestic and foreign sources: financial institutions, credit bureaus and credit reporting agencies, regional and national banking and loan institutions, accounting firms and law firms where any privilege is waived for investigative purposes.
- 4) Collect additional information from any regulatory or enforcement agency, including but not limited to: tax authority or regulator, securities regulators, or any regulatory or enforcement body executing legislation. GPEB reserves the right to disseminate any information provided through the application process and during the registration period with any regulatory or enforcement agency presenting a valid consent to release information signed by the applicant or registrant for the purpose of assisting any regulatory or enforcement agency.
- 5) Collect additional information from any academic institution, association governing professions or designations, organisation governing certification, or previous, current or prospective employer (gaming services provider).
- 6) Collect additional information from any City, Municipal, or Provincial Police department, domestic and foreign law enforcement agency or public body, and the Royal Canadian Mounted Police pursuant to Section 8 (1) of the *Privacy Act of Canada*, including any and all personal information and records, (including convictions, non-convictions and charges regardless of disposition) retained by them in their files or electronic databases accessed through the Public Safety Portal (PSP) query as well as PIRS and CPIC or any other Police or Court Information indices and databases, including any open source material deemed necessary for GPEB to perform registration and enforcement responsibilities under the *Gaming ControlAct*.
- 7) Personal information collected during the GPEB application process may be disclosed to third parties requesting the information with a valid consent from the applicant.

**Disclaimer:** This information is collected for the purposes of determining eligibility to operate or be employed by a business within the gambling industry in the jurisdiction of British Columbia. The personal information provided within this form is collected under the Freedom of Information and Protection of Privacy Act and the Gaming Control Act of British Columbia, Canada. Upon collection of information under the aforementioned provisions, a determination of eligibility will be made by GPEB as provided under Section 65(1) and Section 71 of the Gaming Control Act of British Columbia, Canada. This consent takes effect upon submission. GPEB holds no responsibility for any loss of employment or any negative consequences resulting from this application process. Any inquiries may be made to the Director, Corporate Registration.

Signature of Applicant:	_	
Effective (dd-mmm-yyyy):	_	

			CRIMINAL F	RECORD	CONSE	NT FORM		
FILL NAME O	FARRICANT	(S	end the completed for	orm directly	to this o	ffice for processing)		
FULL NAME O Surname	F APPLICANT		All Given Nam	205		Maiden Nam	•	Date of Birth
Surname			All Given Nan	ies		ivialueli ivalli		(dd-mmm-yyyy)
								, ,,,,,
Alias, Nicknames, N	Middle Names, Othe	r Name Chan	nges (Legal or Otherw	vise)	Ge	nder:		
Place of Birth			T	Drovinco/	Stata		Country	
City				Province/	ce/State Country			
		T						
Height		Weight			lair Colou	ır	Eye C	Colour
Home Addres								
Apt/Suite/Unit Nui	mber/Street or RR# a	and Lot, Con	cession, Township				Home Telepho	ne#
							Cell Telephone	#
City		Provi	nce/State	Postal/2	ip Code 8	& Country	Work Phone #	
			·		•	,		
Identification							<u>I</u>	
SIN/SSN or National	al ID#			ı	Oriver's Li	cence# (Prov/State)		
(Optional)								
NOTE: Applicants they have not been				of of verific	ation, re	gardless of the ou	tcome of a crin	ninal based investigation, that
United States (US)	Residents							
United States appli				-+:f: + - \	de tralactura el			and from the same throw
	nticated local polic n covering those y		•	tificate) w	nich inc	udes a local state	criminai record	search for the area they
			ords check (Identit				uld refer to the	Federal Bureau of
_	•		uctions on how to neir local State Ider				ho may be able	to coordinate all of the
required criminal r	ecord searches.							
Foreign Residents	•	•						
Applicants that res resided in covering			inada or the United	d States m	ust prov	ide a national polic	ce certificate fro	om the country(s) they have
Note: Obtaining a								
citizenship/service police certificate.	s/application/med	<u>lical-police/</u>	<u>police-certificates/</u>	<u>how.html</u>	and sele	ct the country(s) y	ou resided in to	o determine how to obtain a
ľ	ed: If a police cert	ificate is in	a language other tl	han Englisl	n, the ap	plicant must provi	de GPEB with a	copy of the original document
as well as an Englis	h version translate	ed by a cert	ified translator and	l an affida	vit from	the person who co	mpleted the tr	anslation.
FOR GPEB USI	E ONLY:							
☐ CPIC	□ CNI		ERPOL					
□ PIRS	□ ED1	□ отн	IER FED	□ от	HER DIV	ISIONS		
☐ EQUIFAX	☐ OTHER DATA	ABASES						
	Sig	gnature				GBC ID #		Date (dd-mmm-yyyy)

## **DECLARATION**

,, (applicant name) duly swear or affirm, that I have read the above application and attached statements, documents, information, and that they are true and correct to the best of my knowledge and belief. I understand that if necessary, I will be required to provide fingerprints to verify whether or not I have a criminal record. Further, this statement is executed with the knowledge that misrepresentation or failure to disclose any information required by this application is sufficient cause for the rejection by the Gaming Policy and Enforcement Branch of any application. Further, I am aware that later discovery of an omission or misrepresentation made in the above application, attached statements, documents and information may be grounds for a determination of ineligibility or cancellation of any existing or future registration that may be granted. Further, that I am voluntarily submitting this disclosure with full knowledge.
Signature of Applicant:
Effective (dd-mmm-yyyy):

# PERSONAL DISCLOSURE FORM (STANDARD) ATTACHMENTS - CHECKLIST

As a general guideline, attaching the following documents (if applicable) will assist in the completion of the registration process. Each document will be identified with an Attachment Number and cross referenced to the appropriate question.

<b>Attachment 2.:</b> An outline of your involvement in the applicant company and your current responsibilities.
Attachment 3: Residence information for the past 10 years.
Attachment 4: Financial Dependants
Attachment 5: Employment information for the past 5 years.
Attachment 6: Employment discharge, suspension, resignation or disciplinary action.
<b>Attachment 7:</b> Corporate associations you were in the past or are now associated with as an officer, director, shareholder, trustee, beneficiary or related capacity.
Attachment 8: Positions of trust.
Attachment 9: Proof of post secondary education and professional designation(s).
Attachments 10. A., B., C.: Criminal, statutory and regulatory matters.
Attachments 11. A. and B.: Lawsuits, claims and hearings.
Attachment 12: Consumer Proposals, bankruptcy and creditor protection.
Attachments 13. A. to G.: Gaming applications, licensure and registration.
Attachments 14. A. to G.: Gaming investments.
Attachments 15. A.to E.: Income Tax Submissions and Notices of Assessments for three (3) years.
Attachments 16. A. to E.: Court Orders and garnishments.
Attachments 17. A. to B.: Assets and liabilities.
Attachments 18. A. to B.: Income.
Attachments 19. Schedules A to I Statement of Assets and Liabilities.
Criminal Record Consent Form: If applicable, Police Certificate(s), FBI Identification Records Check(s).
<b>Identification:</b> A scanned colour copy of a <b>valid</b> government-issued ID that includes your full legal name, date of birth, signature and photograph, such as a driver's licence or passport.
\$250.00 application fee (wire transfer, money order, or company cheque) Do NOT submit cash.