



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 companies ⁽¹⁾	3	Voting or non-voting shareholders or 5% or greater investors of gaming services provider companies
2	Senior Employees of gaming services provider as deemed	4	Partners or associates of a gaming services provider

(1) 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: 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

* The Application Fee is required to initiate a new or renewal application.

** The Annual Registration Fee is a yearly fee equal to the application fee paid by the applicant and is required to maintain registration. It is remitted to GPEB each year on or before the registration anniversary date (the date registration was approved by GPEB) for the term of registration. Annual fees do not apply to Associates of a registrant.

- Remit fees (money order or certified cheque) payable to: **Minister of Finance in Canadian Funds**. Do **NOT** remit cash.
- Additional funds may be required to cover the costs of any background investigation, special investigation, auditing or administrative costs considered necessary by GPEB to ensure a thorough and complete background investigation of the applicant or registrant. Any other costs incurred in connection with the disclosure shall be the applicant's responsibility.

WHERE CAN I GET MORE INFORMATION?

The attached **LINK** will access the *Gaming Control Act*, the *Gaming Control Regulation* and related information: www.gov.bc.ca/gambling

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 gaming.registration@gov.bc.ca.

RESPONSES

Print or type your responses. Answer all questions fully and truthfully. If a question does not apply to you, so state with *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. For example, print *Attachment 4* on the attachment and state *See Attachment 4* beside Question 4.

Read each question carefully. Submitting the application gives the 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. Your spouse must initial all pages of the disclosure form where his/her personal information is being disclosed.

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.

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. **Retain a copy of your application and all submitted documents for your records.** Be prepared to bring a copy to any personal interviews that are conducted.

WHERE DO I SEND THE COMPLETED FORMS AND FEES?

The Personal Disclosure Form (Standard) and supporting documents (excluding the photograph, signature pages – *Consents, Criminal Record Consent Form and Declaration*) are to be submitted electronically or on disk/USB. Applicants/registrants will be charged \$150/hour for time GPEB staff spend on scanning disclosures and supporting documents.

The signature pages, photograph, fee and disk/USB (if applicable) are to be sent to:

BY COURIER:

Gaming Policy and Enforcement Branch
Licensing, Certification and Registration Division
910 Government St, 3rd Floor
Victoria BC V8W 1X3 Canada
Telephone: (250) 356-0663

BY MAIL:

Gaming Policy and Enforcement Branch
Licensing, Certification and Registration Division
PO Box 9202, Stn Prov Govt
Victoria BC V8W 9J1 Canada

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.

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 and Privacy Act (BC)*.

You may direct questions about the collection and use of this information to the Director of Corporate Registration, GPEB.

CONFIDENTIAL

FOR OFFICE USE ONLY

Amount Received: \$ _____ (CAD)

Payment: cheque money order
 wire transfer

Date (YYYY-MM-DD): _____

Receipt # _____

NEW RENEWAL

CREG File/GBC ID # _____

GBC ID # _____

Application # _____

Registration Class _____

PERSONAL DISCLOSURE FORM (STANDARD)



GAMING POLICY AND ENFORCEMENT BRANCH REGISTRATION DIVISION

Date Application Completed: (YYYY-MM-DD)		Have you previously been registered to participate in the gaming or horse racing sectors in BC? <input type="checkbox"/> No <input type="checkbox"/> Yes, Registration Expiry date: _____
Surname	First Name	Middle Name
Employer or Company Representing	Company Position	Business Telephone
		Email Address

1. PERSONAL INFORMATION

Gender: M F

Last Name

First Name

Middle Name(s)

Date of Birth

(YYYY-MM-DD)

Alias, Nicknames, Maiden Names, Other Name Changes (Legal or Otherwise)

Email Address(es)

Place of Birth

City

Province/State

Country

Citizenship

Do you hold dual citizenship?

No Yes, in the following country/countries:

Home Address

Since (YYYY-MM-DD)

Apt/Suite/Unit Number/Street or RR# and Lot, Concession, Township

City

Province/State

Postal/Zip Code & Country

Telephone #

Fax #

Cell #

Identification

SIN/SSN or National ID #

Driver's Licence # (Province/State)

Passport Number(s) (Country)

Marital Status

Single Married Common Law Separated Divorced

If divorced/separated provide full name of spouse, previous marriage date, and date of separation or divorce

Full Name of Spouse & Date of Birth (YYYY-MM-DD)

Spouse's Surname at Birth

Date of Marriage

Spouse's Occupation

Spouse's Employer

NOTE: The term spouse is defined in the Family Law Act of British Columbia under Section 3 titled "Spouses and relationships between spouses" (http://www.bclaws.ca/civix/document/id/complete/statreg/11025_00)

Spousal Consent to Release Information Initial Here: _____

2. CLASS OF REGISTRATION

A. You are applying for registration as: (check **ALL** boxes that apply)

- Senior Official of applicant company
- Senior Employee of applicant company
- Voting Shareholder or investor with an investment of 5% or greater in applicant company
- Non-Voting Shareholder or Investor with an investment of 5% or greater in applicant company
- Other, as deemed. Specify: _____

Photograph. Attach one non-mounted colour photograph of passport type, approximately 1½" X 1½" and taken within three (3) months prior to the filing of this application. Sign the back of the photograph. The photograph is required for identification purposes only.



B. Describe your involvement in the applicant company and your current responsibilities. If additional space is required, include as *Attachment 2B*.

3. RESIDENCE INFORMATION

Provide the following information for each address where you resided for the past ten (10) years excluding your current address. If additional space is required, include as *Attachment 3*.

Apt/Suite, Street Number, Street Name, City, Province/State, Postal/Zip Code	Own/Rent	Dates (YYYY-MM-DD)	
		From	To

4A. FAMILY INFORMATION – Children and Dependants

Provide the following information for all children, stepchildren, adopted children and dependant family members. If additional space is required, include as *Attachment 4A*.

Full Name	Birth Date (YYYY-MM-DD)	Address	Occupation*

* If applicable, indicate if individual is retired or deceased under their occupation.

4B. FAMILY INFORMATION – Parents

Provide the following information for all parents or legal guardian(s) and parents-in-law. List last address and occupation if applicable. If additional space is required, include as *Attachment 4B*.

Full Name (Maiden)	Birth Date (YYYY-MM-DD)	Address	Occupation*
1. Father			
2. Mother			
3. Father-in-law			
4. Mother-in-law			

* If applicable, indicate if individual is retired or deceased under their occupation.

4C. FAMILY INFORMATION – Siblings

Provide the following information for all siblings. List last address and occupation if applicable. If additional space is required, include as *Attachment 4C*.

Full Name (Maiden)	Birth Date (YYYY-MM-DD)	Address	Occupation*

* If applicable, indicate if individual is retired or deceased under their occupation.

5. EMPLOYMENT INFORMATION

From the age of 18 or for the past 20 years (whichever is shortest), provide the following information regarding work history (including any change in title), involvement in businesses, and/or periods of unemployment commencing with your current employer. If additional space is required, include as *Attachment 5*.

1. From	Current Employer	Business Phone	Is the company involved in the Gaming Industry? <input type="checkbox"/> Yes <input type="checkbox"/> No
To	Mailing Address		
Position Held	Description of Duties	Supervisor Name/Contact Information	Reason for Leaving
2. From	Employer	Business Phone	Is the company involved in the Gaming Industry? <input type="checkbox"/> Yes <input type="checkbox"/> No
To	Mailing Address		
Position Held	Description of Duties	Supervisor Name/Contact Information	Reason for Leaving
3. From	Employer	Business Phone	Is the company involved in the Gaming Industry? <input type="checkbox"/> Yes <input type="checkbox"/> No
To	Mailing Address		
Position Held	Description of Duties	Supervisor Name/Contact Information	Reason for Leaving
4. From	Employer	Business Phone	Is the company involved in the Gaming Industry? <input type="checkbox"/> Yes <input type="checkbox"/> No
To	Mailing Address		
Position Held	Description of Duties	Supervisor Name/Contact Information	Reason for Leaving
5. From	Employer	Business Phone	Is the company involved in the Gaming Industry? <input type="checkbox"/> Yes <input type="checkbox"/> No
To	Mailing Address		
Position Held	Description of Duties	Supervisor Name/Contact Information	Reason for Leaving

6. EMPLOYMENT DISCHARGE / SUSPENSION / RESIGNATION / DISCIPLINARY ACTION

Were you ever discharged, suspended, asked to resign from employment or disciplined in any manner?

No

Yes → If YES, you MUST include the following information for EACH occasion on which you were discharged, suspended, asked to resign, or disciplined as *Attachment 6*.

- i. Employer's name and address
- ii. Name of supervisor/person who initiated the action
- iii. Date of discharge, resignation, suspension or disciplinary action
- iv. Circumstances for discharge, resignation, suspension or disciplinary action

7. CORPORATE ASSOCIATIONS

Provide the following information for all corporations, partnerships, sole proprietorships, limited liability companies or any other business ventures/entities that you were/are associated or involved with as an officer, director, shareholder, trustee, stakeholder, beneficiary, or related capacity. Indicate if the entity was involved with licensed gambling during your term of association or involvement. If additional space is required, include as *Attachment 7*.

Name and Address of Entity (Street, City, Province/State, Postal/Zip Code, Telephone Number)	Company Description	Position Held	Dates (YYYY-MM-DD)		Reference Person	Gaming? Yes or No
			From	To		
1.						
2.						
3.						
4.						
5.						
6.						

8. POSITIONS OF TRUST

Have you ever resigned, been removed or discharged from a position of trust as a trustee, board member, officer, director or in any other position?

No

Yes → If YES, you MUST include the following information as *Attachment 8*.

- 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*. Please include transcripts from all institutions attended.

	Name of Institution	Location	Dates Attended	Degree Attained
College or University	1.			
	2.			
Other	1.			
	2.			
Professional Designation(s)	1.			
	2.			
	3.			

10. CHARGES / CONVICTIONS / FINDINGS OF GUILT

Were you or any business entity associated with you:

- A. ever found guilty or convicted of an offence in any jurisdiction? Includes convictions / charges where an absolute or conditional discharge or a pardon was granted.

No

Yes → If YES, you MUST include the following information for EACH conviction or finding of guilt as *Attachment 10A*:

- 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

- B. ever charged for an offence in any jurisdiction? Includes outstanding charges 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. Date of charge
- iv. Name and address of Court
- v. Court file number
- vi. Next court date

- C. subject to any criminal investigation in any jurisdiction in the past ten (10) years?

No

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

- i. Name and address of entity (if applicable)
- ii. Reason for investigation
- iii. Name and address of organization conducting investigation

11. CIVIL LITIGATIONS

A. Were you or any business entity associated with you ever subject to a lawsuit or a claim in the last ten (10) years in any jurisdiction? Include orders, judgments, administrative sanctions taken, disciplinary hearings, fines, pending dispositions, and penalties imposed.

No

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

- i. Description of claim
- ii. Name of all other parties to the proceeding
- iii. Outcome of proceeding
- iv. Date of proceeding
- v. Name and address of Court
- vi. Court file number

B. Have you or any business entity associated with you ever initiated a lawsuit where a claim was filed in the last ten (10) years 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. Date of proceeding

12. BANKRUPTCY AND INSOLVENCY PROCEEDINGS

Have you or any business entity associated with you ever 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; or
- been denied or refused bankruptcy protection or reorganization under any bankruptcy or insolvency law?

No

Yes → If YES, you MUST include the following information for EACH proceeding as *Attachment 12A*:

- 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. PERMITS, LICENCES, CERTIFICATES AND REGISTRATIONS

Have you or any business entity associated with you ever:

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

No

Yes → 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 → 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 → 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 taken, disciplinary hearings, 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 any way with illegal or unlicensed gambling or gaming enterprise?

No

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

- i. Name and address of employer or associate
- ii. Date of association
- iii. Type of gaming activity
- iv. Date and location of gaming
- v. Explain the circumstances

G. had any relatives associated with or employed in the gambling or gaming industry?

No

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

- i. Name and address of relative
- ii. Relationship to relative
- iii. Relative's role in the industry

14. GAMING INVESTMENTS

A. Have you or will you provide funds, assign assets or invest in the applicant company? If additional space is required, include as *Attachment 14A*.

No

Yes → If YES, state the amount and type of investment and complete 14B.

Total Amount: \$ _____

Type of Investment:

Shareholder Loan \$ _____

Purchase of Shares \$ _____

Asset Transfer \$ _____

Convertible Security \$ _____

Royalty Payments \$ _____

Other (Specify) \$ _____ Specification: _____

B. Investment in the applicant company has or will be derived from the following sources (if additional space is required, include as *Attachment 14B*):

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

C. In the last ten (10) years, have you or any family member received a loan of any kind from the applicant company?

No

Yes → If YES, provide the amount, reason for the loan, and whether or not it has been repaid as *Attachment 14C*.

D. State the number, class, and percentage of share participation including share options not yet vested.

Number	(i) Class (ii) Voting/Preferred/Non-Preferred	Percentage

Spousal Consent to Release Information Initial Here: _____

E. Have you assigned, pledged, or sold your interest in the applicant company OR entered into an agreement whereby your interest will be assigned, pledged, or sold, either in whole or in part?

- No
- Yes → If YES, provide the details as *Attachment 14E*.

F. Are your shares in the applicant company subject to restrictions under any agreement?

- No
- Yes → If YES, provide a copy of the agreement as *Attachment 14F*.

G. Do you hold any other gaming investments?

- No
- Yes → If YES, provide a copy of the agreement as *Attachment 14G*.

15. REPORTING OF INCOME AND TAX FILINGS / RETURNS

A. State the year and location for which you last filed an Income tax submission:

For the year _____, filed in _____, _____
City, Province or State Country

B. Who prepares your tax submission and how are they filed?

Firm: _____ Address: _____

Method of Filing: _____

C. Attach copies of your completed income tax submissions for the last five (5) years for any jurisdiction where you have filed and include as *Attachment 15C* (submissions must be in English).

D. Attach copies of your Notice of Assessment (or equivalent receipt confirming tax compliance) from the Income Tax Authority for the last five (5) years and include as *Attachment 15D* (submissions must be in English).

E. Have you, your spouse, or any business entity associated with you, ever:

- 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 → If YES, provide the circumstances regarding the nature of the false claim and the amount as *Attachment 15E.ii*.
- 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 *Attachment 15E.iii*.
- iv. been subject to any tax fines or penalties?
 - No
 - Yes → If YES, provide the circumstances regarding the fine or penalties and if the debt has been paid as *Attachment 15E.iv*.
- v. been denied an extension for filing a tax submission?
 - No
 - Yes → If YES, provide the circumstances regarding the denial as *Attachment 15E.v*.

Spousal Consent to Release Information Initial Here: _____

16. COURT ORDERS AND GARNISHMENTS

Have you, your spouse, or any business entity associated with you:

A. 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 *Attachment 16A*.

- i. Nature and amount of obligation
- ii. Name and address of the holder of obligation
- iii. Name and address of Court
- iv. Court file number
- v. Current status

B. at any time disobeyed any Court Order requiring you to do, or abstain from doing, any act?

No

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

- 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

C. Ever had a credit card revoked?

No

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

- i. Name of credit card company
- ii. Date credit card revoked
- iii. Reason why it was revoked
- iv. Outstanding balance and current status

D. had any assets seized for non-payment, default, or any other action taken to collect an account that was owed?

No

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

- 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. Have you, your spouse, or any business entity associated with you (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 settler) on any trust or other estate planning instrument?

No

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

iii. engaged in the hiding or non-reporting of assets or liabilities?

No

Yes → If YES, provide details as *Attachment 17A.iii*.

Spousal Consent to Release Information Initial Here: _____

B. List below all contingent liabilities for which you and/or your spouse are obligated. Indicate those loans for which you are a guarantor or describe any civil action pending which may result in a judgment against you.

Name & Address of Creditor	Date Incurred (YY/MM)	Amount	Unpaid Balance	Maturity Date (YY/MM)	Person Liable and Relationship
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		

18. INCOME

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

Source	Amount
	\$
	\$
	\$
	\$
	\$
Total current annual gross income	\$

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

Source	Amount
	\$
	\$
	\$
	\$
	\$
Total current annual gross income	\$

Spousal Consent to Release Information Initial Here: _____

19. NET WORTH

All information provided in this section is as of (YYYY-MM-DD) _____.

A. Complete the following **Statements**. Each entry must be described fully on the appropriate Schedule.

Statement of Assets	Schedule	Current Market Value (Canadian Dollars)	Currency (Converted From)
Cash on hand (if in excess of \$10,000 CDN)		\$	\$
Deposits Financial Institutions	A	\$	\$
Accounts & Notes Receivable	B	\$	\$
Stocks and Bonds	C	\$	\$
Business Investments	D	\$	\$
Real Estate	E	\$	\$
Personal Vehicles	F	\$	\$
Other Assets	G	\$	\$
TOTAL ASSETS		\$	\$

Statement of Liabilities	Schedule	Amount (Canadian Dollars)	Currency (Converted From)
Current Liabilities (debts due and payable within one year)	H	\$	\$
Long Term Liabilities (debts due and payable in more than one year)	H	\$	\$
Mortgages Payable	I	\$	\$
Other Long Term Liabilities	J	\$	\$
Accounts Payable (credit cards, line of credit, etc.)	K	\$	\$
Taxes Payable		\$	\$
TOTAL LIABILITIES		\$	\$

Statement of Net Worth	Amount (Canadian Dollars)
Total Assets (from Statement of Assets)	\$
Less: Total Liabilities (from Statement of Liabilities)	\$
NET WORTH	\$

Spousal Consent to Release Information Initial Here: _____

SCHEDULE A – DEPOSITS FINANCIAL INSTITUTIONS

List all accounts and safety deposit boxes, foreign and domestic, maintained by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as **Schedule A**.

Not Applicable

Name and Address of Financial Institution	Name of Person(s) Appearing on Account	Account Number or Deposit Box	Type of Account	Balance as of (YY-MM-DD)
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Spousal Consent to Release Information Initial Here: _____

SCHEDULE B – ACCOUNTS AND NOTES RECEIVABLE

List all accounts and notes receivable held by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as **Schedule B**.

Not Applicable

Name and Address of Debtor	Date Incurred (YY-MM-DD)	Original Amount	Unpaid Balance	Interest Rate	Maturity Date (YY-MM-DD)	Collateral
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			
		\$	\$			

Spousal Consent to Release Information Initial Here: _____

SCHEDULE C – STOCKS AND BONDS

List the requested information for all stocks, bonds, and convertible securities held or controlled by you and/or your spouse. 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 and your spouse have knowledge of what stocks and bonds are so held. Indicate publicly traded stocks and bonds with an asterisk (*) and attach the stock portfolio. If additional space is required or this information exists in another format, include additional pages as *Schedule C*.

Not Applicable

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

Spousal Consent to Release Information Initial Here: _____

SCHEDULE D – BUSINESS INVESTMENTS

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

Not Applicable

Entity Name	Number of Shares or Units	% of Ownership	Purchase Price	Purchase Date (YY-MM-DD)	Individuals or Entities Sharing an Interest or Ownership %	Current Market Value
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$

SCHEDULE E – REAL ESTATE

List details of any real property where any interest (direct, indirect, vested, or contingent) is held by you and/or your spouse, along with the name of all individuals or entities who share an interest therein. Identify any real estate that generates income with an asterisk (*). If additional space is required or this information exists in another format, include additional pages as **Schedule E**.

Not Applicable

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

Spousal Consent to Release Information Initial Here: _____

SCHEDULE F – PERSONAL VEHICLES

List all motor vehicles, boats, and planes owned (or leased) by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as **Schedule F**.

Not Applicable

Type of Asset	Year and Make	Licence or Registration and VIN	Jurisdiction of Registration	Registered Owner or Leasing Company	Current Market Value
					\$
					\$
					\$
					\$
					\$

SCHEDULE G – OTHER ASSETS

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

Not Applicable

Type of Asset	Owned by	Purchase Price	Purchase Date (YY-MM-DD)	Current Market Value
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

Spousal Consent to Release Information Initial Here: _____

SCHEDULE H – CURRENT AND LONG TERM LIABILITIES

List all current and long term liabilities held by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as *Schedule H*.

Not Applicable

Name and Address of Creditor	Debtor	Date Incurred (YY-MM-DD)	Original Amount	Payment Period	Unpaid Balance	Maturity Date (YY-MM-DD)	Purpose and Collateral
			\$		\$		
			\$		\$		
			\$		\$		
			\$		\$		
			\$		\$		
			\$		\$		

SCHEDULE I – MORTGAGES PAYABLE

List all mortgages or liens payable on real estate held by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as *Schedule I*.

Not Applicable

Name and Address of Creditor	Debtor	Date Incurred (YY-MM-DD)	Original Amount	Amortization Period	Amount Outstanding	Description and Address of Real Estate
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

Spousal Consent to Release Information Initial Here: _____

SCHEDULE J – OTHER LIABILITIES

List any other indebtedness held by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as **Schedule J**.

Not Applicable

Name and Address of Creditor	Debtor	Date Incurred (YY-MM-DD)	Original Amount	Payment Period	Unpaid Balance	Purpose of Liability
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

SCHEDULE K – ACCOUNTS PAYABLE

List accounts payable (credit card, line of credit, etc.) held by you and/or your spouse. If additional space is required or this information exists in another format, include additional pages as **Schedule K**.

Not Applicable

Name and Address of Creditor	Debtor	Date Incurred (YY-MM-DD)	Original Amount	Amortization Period	Amount Outstanding	Description of Debt
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	
			\$		\$	

Spousal Consent to Release Information Initial Here: _____

CONSENT RESPECTING PERSONAL INFORMATION

I, _____, consent to the Gaming Policy and Enforcement Branch pursuant to Part 7 and 8 of the *Gaming Control Act* to:

- 1) Disclose my personal information to the named organizations including but not limited to those listed below to verify 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 employer.
- 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 Control Act*.
- 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 sections 26 (a), 26 (b), 26 (c), & (d), 27(1)(a)(i), and 27(b) of the *Freedom of Information and Protection of Privacy Act (1993)*, and section 62(1) of the *Gaming Control Act (2001)*, 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 (2001)*, 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 Robin Jomha (Director, Corporate Registration) by mail directed to Third Floor, 910 Government St., Victoria, BC, V8W 1X3 or by phone at (250) 350-0663.

Signature of Applicant: _____

Effective (YYYY-MM-DD): _____

SPOUSAL CONSENT RESPECTING PERSONAL INFORMATION

I, _____, consent to the Gaming Policy and Enforcement Branch pursuant to Part 7 and 8 of the *Gaming Control Act* to:

- 1) Disclose my personal information to the named organizations including but not limited to those listed below to verify 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 employer.
- 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 Control Act*.
- 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.

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Signature of **Spouse**
of Applicant: _____

Effective (YYYY-MM-DD): _____

CRIMINAL RECORD CONSENT FORM

(Send the completed form directly to this office for processing)

FULL NAME OF APPLICANTGender: M F

Surname

All Given Names

Maiden Names

Date of Birth

(YYYY-MM-DD)

Alias, Nicknames, Middle Names, Other Name Changes (Legal or Otherwise)

Place of Birth

City

Province/State

Country

Racial Origin

Height

Weight

Hair Colour

Eye Colour

Home Address

Apt/Suite/Unit Number/Street or RR# and Lot, Concession, Township

Home Telephone #

Cell Telephone #

City

Province/State

Postal/Zip Code & Country

Work Phone #

Identification

SIN/SSN or National ID #

Driver's Licence# (Prov/State)

NOTE: Applicants who are not residents of Canada and United States must provide a Police Certificate from their country of residence confirming a criminal record does not exist. If a criminal record does exist, a copy must be provided.

FOR GPEB USE ONLY: CPIC CNI INTERPOL PIRS ED1 OTHER FED OTHER DIVISIONS EQUIFAX OTHER DATABASES

Signature

GBC ID #

Date

DECLARATION

I, _____, (applicant name) being duly sworn or affirmed, depose and say 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 under oath with full knowledge.

Applicant Signature: _____

Subscribed and sworn or affirmed to before me this

(SEAL)

____ day of ____ (month)____, (year)

at _____

City

Province/State

A Commissioner for taking Affidavits and/or Oaths, or
a Notary Public