

APPLICATION FOR RENEWAL OF A LPM SITE GAMBLING EMPLOYEE LICENCE

STANDARD PROTECTION OF PERSONAL INFORMATION ACT, ACT 4 OF 2013 ("POPIA) NOTIFICATION FOR APPLICANTS SUBMITTING ONLINE APPLICATIONS FOR GAMBLING LICENCES OR OTHER REGULATORY APPROVALS

In terms of POPIA, where a person processes another's personal information, then the person or entity processing another's personal information may only do so if such processing is lawful, legitimate and responsible and is done in accordance with the provisions of POPIA.

In accordance with the powers conferred on the WCGRB in terms of the Western Cape Gambling and Racing Act, 1996 and the National Gambling Act, 2004, the WCGRB must process your licence application and conduct the requisite probity investigation to determine your suitability.

In order to comply with POPIA, the WCGRB must provide persons whose personal information is processed with a number of details pertaining to such processing, before such information is processed. These details are housed under the **WCGRB Processing Notices** on the WCGRB website (<u>https://www.wcgrb.co.za/notices</u>) and should be accessed and read.



Western Cape Gambling and Racing Board Wes-Kaapse Raad op Dobbelary en Wedrenne • Ibhodi Yelentshona Kapa Yokungcakaza Ngemali Neyemidyarho



FOR OFFICE USE ONLY		REFERENCE NUMBER				LICENCE NUMBER			
		ІТС СНЕСК				IDECO REPOR	RT		
APPLICATION FOR RENEWAL OF A LPM SITE GAMBLING EMPLOYEE LICENCE						ICENCE			
Surname		Maiden			name (If applicable)				
Full name	25								
ID numbe	er / Passport								
Home add	dress								
Suburb					Postal Code				
Telephone numbers		Home:		Office		Cell		l:	
Previous Registration		YES	NO	Site Names &					
			Registration No).				
DISCIPLINARY ACTIONS: Have you been subjected to any disciplinary action in connection with your employment									
during the last five years?									
Yes No									
If yes, pro	If yes, provide details								
CRIMINA	L OFFENCES:	Have you ever been	arrested	for, charge	ed with,	or convicted of a	criminal o	offence?	
Yes No									
Date	Name	Nature of charg	e	Name of c	ourt	Outcome of	case &	Date	
		or conviction				sentence, if applicable			

Signature – Applican	it	Date		
Name of applicable LPM Route operator:				
Name of registered business issued with a LPM Site licence:			Expiry	Date: / /
Trading name of business:			Busine	ss Licence No.

Details of representative of the LPM Route operator to confirm that the applicant has been registered on the CEMS database		
U U	Print name	Signature



AUTHORISATION

TO: All courts, probation departments, employers, educational institutions, banks, financial and other institutions, the Receiver of Revenue, credit bureau, Act agencies, all agencies and institutions without exception, both domestic and foreign, and to whomsoever else this authorisation may duly be presented.

Full names / Surname				
Street address				
ID number / Passport Number				
Signature - Applicant				

I HEREBY AUTHORISE the Chief Executive Officer of the Western Cape Gambling and Racing Board or any person authorised by an original LETTER OF AUTHORITY, signed by the Chief Executive Officer ("an authorised delegate"), to have access to, in order to inspect and to obtain copies of:

- (a) any credit report, any other report which has any bearing on my creditworthiness, credit history, credit standing or credit capacity;
- (b) any records relating to any investigations into my activities conducted by any police force, crime investigation agencies, corporate regulatory agencies or any gambling or casino regulatory bodies;
- (c) any court records relating to any present, past or pending civil or criminal court proceedings to which I am or was a party;
- (d) any current and past employment records or correspondence relating to me and
- (e) any other document, record or correspondence pertaining to me.

You are HEREBY AUTHORISED to release to the Chief Executive Officer of the Western Cape Gambling and Racing Board or an authorised delegate, all the documents, reports and information requested by any of them.

This AUTHORISATION supersedes and countermands any prior request or authorisation to the contrary. A photocopy of this AUTHORISATION will be considered to be as effective and as valid as the original.

To be signed in the presence of and certified by a Commissioner of Oaths

	All correspondence to be add	All correspondence to be addressed to:			
	The Chief Executive Officer	Telephone no : 27-21-480 7400			
	P O Box 8175				
	ROGGEBAAI	Web site: www.wcgrb.co.za			
	8012				
	Republic of South Africa				
Commissioner of Oaths					