

Junket Representative Licence Application Form

- This application form should be used by anyone wishing to be employed as a junket representative for a junket operator holding a Junket Operator licence with the Commission. A "Junket Representative" is defined under the Casino Operations and Control Law of 2015 as a natural person, who provides services for the referral, procurement or selection of persons who may participate in any junket to the Republic of Cyprus Integrated Casino Resort, regardless of whether such activities occur in the Republic or not.
- Please read the Junket Representative Licence Application Form Guidance Notes before completing this application form.
- If you make a mistake, please fill in the box and write the correction as near to the mistake as possible. **Do not use correction fluid.**
- If there are **any** changes to your circumstances, or if **any** of the information contained within this form changes during the period between submitting your application and your application being determined, you **must** notify the Commission immediately. Failure to do so could result in your application being delayed or cause the decision on your licence to be reviewed.
- If the application fee, and if required an investigation fee, is not provided, the form is completed incorrectly or supporting documentation is missing or not provided upon request, your application will be delayed, and this may result in your application being determined based on the information we have available which may affect the decision on whether a licence can be granted.

Section 1. Applicant's Details

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Eirct name

Please provide the full name and address of the applicant who is applying for the licence and the full name and address of the applicant's spouse or civil partner if applicable.

Applicant's Name and address:

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| Current address | | | | | | | | | | | | | | | | | | |
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| Spouse or civil part | ner nam | e and a | addres | s: | | | | | | | | | | | | | | |
| First Name | | | | | | | | | | | | | | | | | | |
| FIIST Name | | | | | | | | | | | | | | | | | | |
| Last Name | | | | | | | | | | | | | | | | | | |
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| Previous last name | (if applic | able) | | | | | | | | | | | | | | | | |
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| Address if different | from Ar | nlican | nt's | | | | | | | | | | | | | | | |
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| Employer name and address | |
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| Position at | |
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| Employer since | |
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| Employee ID | |
| number | |
| | |
| Name of | |
| Supervisor | |
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You must complete the Photograph Identification Form which is included in this application and attach a passport sized photograph. Please see Guidance Notes for instructions.

Please provide the name and address of the Junket Operator with whom you are or will be employed and the licence number of the Junket Operator licence issued by the Commission. Name of junket operator as it appears on their licence (or application if not yet licensed by the Commission):

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Section 3. Contact Details

Section 2. Junket Operator Details

Question 4.

If not you, please provide the following details for the contact you want the Commission to correspond with about this application. This can be an employee of the junket operator or other representative such as a lawyer. Please note that ALL correspondence and licences relating to this application will be issued to this person.

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Question 6

Employment History. Please provide information regarding your employment over the past ten years working backward from the present. Furnish details regarding periods of unemployment in the correct sequence.

| Period of employment From-To (MM/YY) | Name, Address and telephone no. of employer | Position held and description of duties | Name of Supervisor | Reason for Leaving |
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Section 4. Licence History

Question 7.

The Commission requires details of all junket representative licences or any other gaming-related licences, permits or certificates of suitability in any jurisdiction currently or previously held by the applicant. In addition to requiring copies of any licences held, the Commission will also require confirmation from each jurisdiction where a licence is held as to your track record of compliance with legal and regulatory requirements. Please provide with the application a copy of each such licence and confirmation from the regulator where each licence, permit or approval is held.

Do you currently hold, have any applications pending or have you previously held any junket representative or any other gambling-related licences, permits or approvals in any jurisdiction? Provide details of all such licences, permits or approvals by using a continuation sheet if necessary

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| Yes - | nlease | provide | details | helow |



No - please continue to question 9

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| Licence nu | mber | r | | | | | | | | | | | | | | | | | | | | |
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| Brief descr | intio | n of | activ | /ities | aut | hori | sed | hv li | cend | e or | ann | rova | ı | | | | | | | | | |
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| Have you licences d action. | had a etaile | any (ed ir | disc 1 res | iplin spon | ary se t | acti o qu | on t | akei on 7 | n ag 7? P | ains leas | t it i e inc | n th | e las any | st te / cui | n ye rren | ars i | in re pend | spe | ct of disc | the ciplin | nary | |
| Yes - plea (use a con necessary) | tinua | | | | belo |)W | > | | No · | - ple | ase (| cont | inue | to q | uest | ion ! | 9 | | > | | | |
| Date of act | tion | | | | | | | | | | | | | | | | | | | | | |
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| Details of action | | | | | |
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| Disqualified | X | Cancelled | X | Warning | X |
| Suspended | X | Revoked | X | Conditions/Restrictions Attached | X |
| Reviewed | (plea | Other ase specify belov | X (v) | Fine | X |
| Please provide details of th and any additional informa | | | | | g the outcome |
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| Section 6. Criminality | and Inves | tigations | | | |
| Question 9. Have you EVER been foun penalty relating to your d awaiting trial or under inv | uties? Plea vestigation | se also include | details | if charged with an offen | ce but |
| police from each jurisdict | | | | | |
| Yes - please provide detail (use a continuation sheet if necessary) | | No - plea | ise go t | o question 10 | |
| Date DD/MM/YYYY | | | | | |
| Details of Offence | | | | | |
| Director's Liability | Corr | ruption | X | Companies Act | X |
| Insolvency Offences | Frau | ıdulent Trading | X | Restraint, confiscation orders, asset recovery | X |
| Regulatory Offences | X Fals | se Accounting | X | Felony offences | X |
| Financial Services and Market Act Offences | | porate Islaughter | X | Other (please specify below) | X |

Please provide full details of the circumstances surrounding the offence below (including details of any penalties issued and the location of the convicting court and country). If you have crossed felony offences, ensure you specify which offence was the subject of the conviction/are awaiting trial on/or under investigation. Please use a continuation sheet if necessary.

| Question 10. | | | | | | | | | | | | | | | | | | |
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| governing body any junket repr | esentati | ive lice | nce o | | | | | | | | | | | | | | |)† |
| approval in the | last ten | vears? | • | | | | | | | | | | | | | | | |
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| 10b. Date DD/MM/YYYY Name of Investigating Body Country Type of Licence held Case/investigation reference number Please provide details of the circumstances surrounding the investigation any additional information below including the outcome. If investigation is still current or pending, please include name of investigating officer, if known. | | | | | | | | | | | | | | | | | | |
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Question 11.

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| Have | YOU AWAR had | any civil la | ral action t | aken against | vou (including | 1 County Coi | urt luide | aamante\7 |
| Have | you evel liau | ally Civil let | jai activii t | aktıı ayanısı | you (IIICIUUIIIC | County Co | n t juut | gennemes): |

| Yes – please complete the following details (use a continuation sheet if necessary) No - please continue to question 12 |
|---|
| Date of action DD/MM/YYYY |
| |
| Name of body taking legal action |
| |
| Nature of civil legal action |
| |
| |
| |
| Original amount at date of action (if applicable) [€ |
| Amount outstanding (if applicable) |
| Timount odestanding (in applicable) |
| Please provide details of the circumstances surrounding the civil action, including the outcome, the location of the court and country, and any additional information below. Please use a continuation sheet if necessary. |
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| Section 7. Financial Information |
| Question 12. |
| Have you been declared bankrupt/sequestrated or entered into an agreement with creditors or an Individual Voluntary Agreement/Protected Trust Deed in the past ten years, or have you previously been declared bankrupt, sequestrated, etc. and have a current payment plan still in place? |
| Yes – please complete the following details (use continuation sheet if necessary) No – please continue to question 13 |
| Please note you are required to provide copies of all documents relating to your bankruptcy, Individual Voluntary Agreement, etc. in addition to completing the details below (see Guidance Notes). |
| Date of action/agreement DD/MM/YYYY |
| |
| Date of discharge (if applicable) DD/MM/YYYY |
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| Nai | me o | f bc | ody/ | cour | t tak | cing | actic | on_ | | | | | | | | | | | | | | | | |
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Are you in default on any of the liabilities listed in response to question 13?

Yes - please complete the following details (use a continuation sheet if necessary)



No - please continue question 14



Please provide details of the circumstances surrounding the default and any additional information below. Please use a continuation sheet if necessary.

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Question 14.

In order to assess the financial aspect of your application the Commission requires the following information. Please refer to the Guidance Notes for further details.

- Credit reports obtained within the last sixty days.
- Original bank statements for the past three months for all bank accounts held by the applicant and the applicant's spouse.
- A statement of monthly income and expenditure for the applicant and the applicant's spouse for the past three months preceding this application.
- Annual tax returns filed for the past three years in any jurisdiction.

Please note the Commission may request additional financial information.

Question 15.

Please provide details of your accountants, if any, for the last 10 years. Please use a continuation sheet if necessary.

| Name | Address | Country | From | To |
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| Question 16. | | | | |
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| Please provide details of | of all bank or other financ ten years. Use a continua | | | hat are or have been |
| Name of bank/financial institution | Branch name and address | Account number | Currently in use (Y or N) | Names of account signatories |
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| Question 17. | I | | | L |
| Do you have any curren in the last 5 years? Plea | t loans or has obtained lose provide copies of any | oans from in loan docume | dividuals, co ents. | mpanies or institutions |
| Yes - please provide deta (use a continuation sheet necessary) | ails below No - t if | please go to (| question 18 | |
| 17a. Name of lender | | | | |
| Address of lender | | | | |
| Address of letidel | | | | |
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| | | | | |
| Date of loan from | Date to | | | |
| Loan Amount | | | | |
| Currency | | Amount | | |

| Purpose of loan. Please provide details – also indicate if applicable how much of the loan is outstanding. |
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| 17b. Name of lender |
| T76. Name of fender |
| Address of lender |
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| Date of loan from Date to |
| Date of Islan Home |
| |
| Currency Amount |
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| Purpose of loan. Please provide details – also indicate if applicable how much of the loan is outstanding. |
| outstanding. |
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| 17c. Name of lender |
| 17C. Name of ferider |
| Address of lender |
| |
| |
| Date of loan from Date to |
| Date of four from |
| Loan Amount |
| Currency Amount |
| |
| Purpose of loan. Please provide details – also indicate if applicable how much of the loan is outstanding. |
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| Question 18. | |
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| During the past ten years have you maintaine name of a nominee for you? | d any numbered account or any account in the |
| Yes - please provide details below (use a continuation sheet if necessary) | No – please continue to question 19 |
| 18a | |
| Name of company | Name of Nominee |
| | |
| Name of bank | Place of bank and country |
| Name of Dank | Trace of Bank and Country |
| | |
| Account number | Account type |
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| Details: | |
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| 18b | |
| Name of company | Name of Nominee |
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| Name of bank | Place of bank and country |
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| Question 19. | | | | | |
| Have your enlandered your b | | | waterway familia the share | | el |
| Have you submitted your in preceding the date of this a | | | | | |
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| Yes – please provide tax clear certificates from each countri | | | please provide explan continuation sheets as | | X |
| certificates from each countr | у. | 036 (| continuation sheets as | necessary. | |
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| Section 8 Junket oper | ator relationsh | in with th | ne annlicant | | |
| Section 8. Junket oper | ator relationsh | ip with th | ie applicant | | |
| The Commission requires | evidence that the | applicant ha | s been vetted by the | | |
| The Commission requires of that the junket operator ha | evidence that the a | applicant ha | s been vetted by the has entered into or i | | |
| The Commission requires | evidence that the a | applicant ha | s been vetted by the has entered into or i | | |
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| The Commission requires of that the junket operator had an employment or consultance. Question 20. Does the junket operator in agreement with you as a junket operator. | evidence that the a is approved the ap ant contract with t amed in Question inket representati ction, the name of | applicant happlicant and the applicant and the applicant a currently ve in another the casino | has entered by the has entered into or it. have an employment per jurisdiction? If so, or casinos to which the | ntends to er t or consulta please provi | nter into ant de |
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Question 21.

You are required to submit with this application:

- (1) A letter from the junket operator where you are or will be employed confirming that the junket operator has or intends to enter into a contact of employment or consultancy with you and enclosing a copy of the actual or proposed employment or consultant contract with the junket services operator; and
- (2) A letter from the ICR operator confirming that after having completed its own vetting procedures, the ICR operator confirms your suitability and that based on that review and in view of the Commission's licensing objectives, the ICR operator recommends that the Commission issue you a junket representative licence.

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| anything else you would like to add in support of your application? If so, please provide details below. | |
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Section 9. Declaration

The following declaration must be signed in all cases by you:

Should the information provided in this application form cease to be correct, or if there are any changes to the information provided in the application form between the date the application form was submitted and the date it is determined, it is my responsibility to inform the Commission immediately. Failure to do so could result in any licence subsequently issued to be reviewed and possibly revoked or other penalties imposed.

The Commission may require confirmation or further information from third parties in respect of any evidence or documentation I have provided in support of this application. I agree to grant authorisation for the Commission to request and receive information about me and/or its officers as named in this application from those third parties.

I agree to provide authorisation for the Commission to obtain bank references (status enquiries).

I understand that any misrepresentation of failure to reveal information or grant any authorisation requested may be deemed sufficient cause for the refusal or revocation of the licence.

I certify that to the best of my knowledge that the information given in this application is complete and correct and that all material information and supporting documentation has been included and I have attached the Photograph Identification Form and photograph/JPEG image.

I understand that the Commission may conduct criminal records check. I confirm that the information that I have provided in support of this criminal records check is complete and true and I understand that to knowingly make a false statement for this purpose is a criminal offence.

I consent to having a copy of this application and any photograph, fingerprints or palm prints taken to the Police, who shall inquire into and report to the Commission on such matters as the Commission requests.

| application change. | | | | | | | | | | | | | | | |
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| Section 10. Enclosures | | | | | | | | | | | | | | | |
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| Please cross the boxes to indicate the required Please ensure you have read the Guidance Note | | | | | | | | | | ııcar | oie): | | | | |
| Application fee (non-refundable) €1,000 | | | | | | | | | | | | | | | |
| Investigation fee | | | | | | | | | | | | | | | |
| investigation ree | | | | | | | | | | | | | | | |
| Copies of all junket representative related licences, permits, approvals held by you. (see Q7) | | | | | | | | | | | | | | | |
| Confirmation from the regulator of each jurisdiction where a licence is held as to your track record with regard to compliance with the legal and regulatory requirements (see Q7) | | | | | | | | | | | | | | | |
| Copies of criminal record checks from each juri ten years | Copies of criminal record checks from each jurisdiction where you have lived in the past | | | | | | | | | | | | | | |
| Financial statements: credit reports; original ba income and expenditures; annual tax returns (so | | men | ıts; | stat | eme | nt c | of m | onth | ly | | | X | | | |
| Copies of any loan agreements and associated of | documei | nts (| see | 01 | 7) | | | | | | Ī. | | | | |
| Copies of tax clearance certificates for the prev | | | | | | iei. | cdic | tion | _ | | | X | | | |
| where tax returns are filed (see Q19) | ious tiii | ee y | ear | 5 111 | the | Juii | Suic | LIOII | • | | | X | | | |
| Copies of the confirmation letters from the junk | ket oper | ator | an | d th | e IC | R (s | ee Q | 21) | | | | X | | | |
| Copy of the proposed employment or consultan Q21) | it contra | ict w | /ith | the | jun | ket (| oper | ator | (se | e | | X | | | |
| Passport sized photo and completed Photo Iden Notes) | ntificatio | n fo | rm | (see | Q2 | and | d Gu | idan | ce | | | X | | | |
| Authorisation for Release of Information | | | | | | | | | | | | X | | | |
| Continuation sheets -please indicate number in | cluded | | | | | | | | | | X | | | | |

I agree to notify the Commission immediately should any of the information given in this

Remember: Your application will not be considered unless all relevant questions have been completed and the application fee has been paid in full. Failure to provide the above information or to provide further information when requested by the Commission may result in your application being determined based on the information available at the time which may affect the outcome of your application.

The Cyprus Gaming and Casino Supervision Commission is a data controller under the terms of the Republic of Cyprus Processing of Personal Data (Protection of the Individual) Law 138(I) 2001 and amendments thereto, as superseded by the General Data Protection Regulation (EU 2016/679) on 25 May 2018. The information provided in this application will be processed for the purposes necessary for the Commission to carry out its functions and meet its legal obligations. The data may be shared with third parties who fulfil a service on behalf of, and under the express instructions of, the Commission. It may also be shared with other bodies where it is necessary to do so and where we are legally required or permitted to do so. This may include sharing data, when appropriate, with relevant public authorities, overseas regulators, law enforcement agencies. Sharing data is primarily for the purpose of performing our regulatory functions such as assessing the suitability of individuals and organisations to be licensed but it may also be necessary to share information for the prevention and detection of crime or for the processing and collection of casino tax and enforcement of the Law Regulating the Establishment, Operation, Function, Supervision and Control of Casinos and Related Matters of 2015, the Casino Operations and Control (General) Regulations of 2016, the Prevention and Suppression of Money Laundering Activities and Terrorist Financing Law of 2007 to 2021 and the licence terms and conditions contained in licences issued by the Commission. Your Personal Data are retained by the Cyprus Gaming and Casino Supervision Commission for as long as it is required by the law. The appropriate organizational and technical measures are taken to protect your Personal Data. You may exercise the rights of information, access, correction, deletion, restriction of processing, objection and portability, by physical mail at 3, Thaleias Str., 1st floor, 3011 Limassol, Cyprus or by sending an E-mail to dpo@cgc.org.cy or by phone: +35725573827. You have the right to submit a Complaint to the Personal Data Protection Commissioner lasonos 1, 1082 Nicosia, Cyprus, Postal address P.O. Box 23378, 1682 Nicosia, Cyprus, Tel: +357 22818456, Fax: +357 22304565. For more information visit the Commissioner's website: http://www.dataprotection.gov.cy.

AUTHORISATION FOR RELEASE OF INFORMATION

| To, and without exception, both domestic and foreign, all government departments and agencies, employers, educational institutions, courts, banks, financial and other such institutions and any other third party that may hold relevant information. | | | | | | | | | | | | |
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| (please complete your name in full in capital letters) | | | | | | | | | | | | |
| Date of birth | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | |
| hereby authorise the Commission, its officers and agents to undertake such enquiries and request, receive and obtain any and all information, including copies of any record, documentation or opinion whether in written, electronic or other form, that the Commission may require when considering the suitability of the individual (either in application for a licence or as a person considered by the Commission to be relevant to an application), both upon application for any licence, and, if so granted, throughout the life of any licence. | | | | | | | | | | | | |
| This authorisation shall supersede and countermand any previous request or authorisation to the contrary. A photocopy or electronic version of this authorisation will be considered as effective and as valid as the original. | | | | | | | | | | | | |
| Date | | | | | | | | | | | | |

PHOTOGRAPH IDENTIFICATION FORM JUNKET REPRESENTATIVE LICENCE APPLICATION

The applicant must provide their full name below, attach photograph in space provided and then sign and date the form (See Guidance Notes).

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Please read the Guidance Notes for details of the type and size of the photograph required.

