

# Gaming Equipment Approval Application Form

- Under Part VII of the Law Regulating the Establishment, Operation, Function, Supervision and Control of Casinos and Related Matters of 2015 (Law) and Regulation 26 of the Casino Operations and Control (General) Regulations of 2016 (Regulations), the Commission must approve or exempt from approval all gaming equipment to be used in the Cyprus Integrated Casino Resort (ICR). This application form should be used for approval of gaming equipment, including gaming machines, electronic monitoring systems, gaming tables, electronic gaming tables, chips, dice cards and parts of, or accessories of any such machine, equipment or systems for use in the ICR.
  - Application for approval of gaming equipment for use in the ICR may **only** be made by the ICR or by the holder of a Gaming Supplier licence issued by the Commission. Where the supplier of gaming equipment does not hold a Gaming Supplier licence issued by the Commission the ICR must make the application for approval of the gaming equipment.
- Please read the Gaming Equipment Approval Application Form Guidance Notes before completing this application form. Note under Regulation 26(1), the Commission may waive all or part of the approval requirements in certain circumstances. If the applicant believes that it qualifies for this exemption, it should contact the Commission.
- Separate applications must be made for each type of gaming equipment for which approval is sought.
- 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 approval can be granted.

# Section 1. Applicant Details Question 1. Please provide the name of the applicant who is applying for the gaming equipment approval: Applicant name (the company, individual or other entity either holding a Gaming Supplier licence issued by the Commission or the operator of the ICR, applying for the gaming equipment approval). If the entity is a partnership, the name of each individual partner must be listed. Trading Name(s) (if different from above) Section 2. Contact Details Question 2. 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 applicant or other representative such as a lawyer. Please note that ALL correspondences and approvals relating to this application will be issued to this person. Title First Name (s) Last Name Position Property number House Name Street

Town/City

Country

Telephone number (including area/country code)  Email address  Please confirm if the person named above will be the main contact for all matters relating to the garning equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Garning Equipment Approval (if granted).  First name(s)  Section 3. Type of gaming equipment  Couestion 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming Tables  Gaming Tables  Electronic table game  Systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?  Yes	Zip/ Postal code	e																				
Email address  Please confirm if the person named above will be the main contact for all matters relating to the gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine   Gaming Tables  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please confirm if the person named above will be the main contact for all matters relating to the gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Gaming Tables  Electronic table game systems  Chips  Tokens  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Telephone num	ber (	(incl	udin	g ar	ea/c	ount	ry co	ode)					_								
Please confirm if the person named above will be the main contact for all matters relating to the gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Gaming Tables  Electronic table game systems  Chips  Tokens  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine   Gaming machine  Gaming Tables  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Email address																					
gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine   Gaming machine  Gaming Tables  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
gaming equipment approval (if granted) or whether they are the contact for application purposes only.  Main Contact  Contact for this application only  If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine   Gaming machine  Gaming Tables  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
If the person listed above is the contact for this application only, please confirm the full name and email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game																						ly.
email address of the individual you want to be the main contact for all other matters relating to your Gaming Equipment Approval (if granted).  First name(s)  Last Name  Email address  Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game	Main Contact		X							Con	ntact	for	this	appl	icati	on o	nly					
Last Name  Email address  Email address  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	email address o	of the	ind	lividu	ual y	ou v	/ant	to b														r
Email address    Couestion 3. Type of gaming equipment	First name(s)																					
Email address    Couestion 3. Type of gaming equipment																						
Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Last Name																1					
Section 3. Type of gaming equipment  Question 3.  Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Email address																					
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?																						
Please indicate the type of gaming equipment for which you are seeking approval in respect of this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Section 3 Tv	ne (	of a	ıam	ina	ear	iinn	nen	t													
this application. Please note that separate applications must be made for each type of equipment and/or gaming machine therefore only one box should be ticked here.  Gaming machine  Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?		pe (	of g	jam	ing	equ	ıipn	nen	t													
Electronic table game systems  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?		pe (	of g	jam	ing	equ	ıipn	nen	t													
Chips  Chips  Tokens  Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Question 3.  Please indicate this application	the n. Plo	typ ease	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu	st b	e ma	ade 1							
Playing Cards  Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Question 3.  Please indicate this applicatio and/or gaming	the n. Plo j ma	typ ease	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu   be	st bo	e ma ed h	ade 1 ere.	for e						
Roulette wheels  Other (please specify below)  Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Question 3.  Please indicate this applicatio and/or gaming Gaming machine Electronic table	the n. Plo n ma	typ ease chin	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu l be	st b tick Gam	e ma ed h	ade fere. Tabl	es	ach	typ			ipme	
Are you also providing parts of and/or accessories for the machine/equipment for which you are seeking approval?	Question 3.  Please indicate this application and/or gaming Gaming maching Electronic table systems	the n. Plo n ma	typ ease chin	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu be (	st bo ticko Gam Elect	e ma ed h ing	ade fere. Tabl	es	ach	typ			ipmo	
seeking approval?	Question 3.  Please indicate this application and/or gaming Gaming maching Electronic table systems  Chips	the n. Plo n ma	typ ease chin	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu be (	st be ticke Gam Elect	e ma ed h ing	ade fere. Tabl	es	ach	typ			ipmo	
seeking approval?	Question 3.  Please indicate this application and/or gaming Gaming maching Electronic table systems  Chips  Playing Cards	e the n. Plo n ma ne e ga	typ ease chin	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu   be 	st bo ticko Gam Elect Foke	e ma ed h ing roni	ade fere. Tabl	es onit	orin	typ g	e of	equ	ipmo	
Yes No	Question 3.  Please indicate this application and/or gaming Gaming maching Electronic table systems  Chips  Playing Cards	e the n. Plo n ma ne e ga	typ ease chin	e of	gan e th	ning at s	equ epar	ipm ate	ent app	icat	ions	mu   be 	st bo ticko Gam Elect Foke	e ma ed h ing roni	ade fere. Tabl	es onit	orin	typ g	e of	equ	ipmo	
	Question 3.  Please indicate this application and/or gaming Gaming maching Electronic table systems  Chips  Playing Cards  Roulette whee	e the n. Plo n ma ne e gal	typ ease chin	e of e not ee th	gan e th eref	ning at so ore	equ epar only	ipm rate one	ent appl e bo:	licat x sh	ions ould	mulbe (	st b tick Gam Elect Toke Dice	e ma ed h ing rroni ens	Tablic m	es es onit	ecify	g be	e of	equ	X X X	ent

# Question 4.

Please provide the name and address of the manufacturer of the gaming equipment along with its country of incorporation, date of incorporation and registered address and provide the number and date of issue of the manufacturer's Republic of Cyprus Gaming Supplier licence (see guidance notes).

Deta	Details of gaming equipment manufacturer																							
Nan	ie																							
Add	res	5																						
Cou	ntry	of I	Inco	rpor	atio	n																		
Date	e of	Inco	rpo	ratio	n																			
Con	ıpar	ny ni	umb	er																				
Reg	iste	red .	Addı	ress																				
			nber		olic o	of Cy	/pru	ıs G	amir	ng Su	uppl	ier l	iceı	тсе	(see	e gu	ida	nce	no	tes	)			
	lice	iiuii	IDEI																					

#### Question 5.

Please provide a short description of the gaming equipment including the gaming equipment type, model name, model number and software/firmware version number, where applicable.

**Description of gaming equipment** 

Тур	e:																
															Τ		
Mo	del	Nam	e:														
Мо	del	Num	ber:														
Sof	twa	re/fi	rmw	/are	vers	sion	nun	nbei	r:								

### Section 4. ICR Operator intent to purchase

#### Question 6.

Has the ICR operator indicated its intention to purchase the gaming equipment submitted in the application? Please provide a letter from an authorized representative of the ICR operator intending to purchase the gaming equipment along with a conditional contract between the ICR operator and the gaming equipment supplier.

Yes - Please provide letter as above.



No



#### Section 5. Compliance Test Report

## Question 7.

Where applicable has the gaming equipment been submitted to a test service provider licensed by the Commission with a Gaming Supplier licence, certifying that the gaming equipment complies with the relevant requirements in the Commission Standards Notices and the relevant provisions of the Law and Regulations and a compliance test report issued?

Yes - Please provide details below and submit a copy of the test report.



No



Na	me c	of te	st pr	ovid	er													
Rep	oubl	ic of	Cyp	rus	Gam	ing :	Supp	olier	licer	ice n	numk	er						

#### Section 6. Documentation

#### Question 8.

Please provide the following documentation relating to the gaming equipment:

- (1) Diagrams, photographs or videos demonstrating the general overview of the gaming equipment in terms of functionality, specifications and technicality;
- (2) Copy of executable software, where applicable;
- (3) All relevant technical, operational and installation manuals for the gaming equipment, explaining in detail all functions configurations and error conditions;
- (4) All quality manuals of the production processes; and
- (5) Relevant product brochures and fact sheets for the gaming equipment.

#### Section 7. Approval in other jurisdictions

#### Question 9.

Has the gaming equipment been approved for use or licensed to gaming operators in another Member State of the European Union or has it been legally manufactured in a state belonging to the European Free trade Zone which has signed the Agreement for the single European Area or in a state with which the European Union has signed an agreement for a customs union and mutual recognition of compliance evaluation of products? Please provide details below and certified copies of such approval or licences. Use a continuation sheet if necessary.

Name of entity holding approval or licence	Type of licence or approval and number	Full name and country location of issuing authority	Held from/ to	Reason for cessation if applicable

#### Question 10.

Do the technical standards and specification of the gaming equipment licensed or approved in Question 9 substantially comply with Commission Technical Standards Notices, the Law and the Regulations? If not, describe in detail below the deviations.

Yes - use continuation sheets as necessary.



No



Description of any variations in technical standards and specifications:	

# Question 11.

Please provide details of any other jurisdictions other than those referred to in question 9 in which the gaming equipment has been approved by the regulatory authority under the law of that jurisdiction relating to the regulation of casino gaming and provide certified copies of such approval or licences.

Name of entity holding a licence or approval	Type of licence or approval and number	Full name and country location of issuing authority	Held from/ to	Reason for cessation if applicable

Question 12.  Has the approval or equipment supplier regulatory action in action.	r (as per	questic	ns 9	and	11)	bee	n rev	vok	ced	or b	een	suk	oject	of a	any (	othe	er	
Yes - please provide (use a continuation sinecessary).  Date of action	sheet if	elow	X	N	o - p	lease	e cor	ntin	ue 1	to qı	uest	ion	13					
Name of issuing aut  Location of issuing a  Licence/approval nu	authority																	
<b>Details of action</b> Revoked			X			Cond	litio	ns/	Res	trict	ions	atta	ache	d	X			
Warning			X			Othe		ped	cify	belo	ow)				X	_		
Please provide detail any additional inforr														the	outo	come	e and	t

#### **Section 8. Declaration**

The following declaration must be signed in all cases:

- a) If the applicant is an individual, by that individual;
- b) If the applicant is a partnership, by all individuals who are partners;
- c) If the applicant is a company by the company secretary (if it has one) and/or at least one director;
- d) In any other case, by a duly authorised officer of the applicant.

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 the applicant's responsibility to inform the Commission immediately. Failure to do so could result in any approval 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/we have provided in support of this application. I/we agree to grant authorisation for the Commission to request and receive information about the applicant and/or its officers as named in this application from those third parties.

I/we 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/we certify that to the best of our knowledge my/our knowledge that the information given in this application is complete and correct and that all material information and supporting documentation has been included.

I/we agree to notify the Commission immediately should any of the information given in this application change.

Fir	st n	ame	(s)																					
Las	st n	ame																						
	l			l	l				1	1	1		1	1	1		1	1	1	1	1	1	1	l
Po	sitio	on in	org	anis	atio	n																		
Sic	nec	1	I	I		I	1	I	1		1	1	1	1	1	Date	DD	/MN	1/Y)	YYY	1	1	1	I
										1								•	•					
										J														
Fir	st n	ame	(s)																					
Las	st n	ame																						
	ı	1				l.				1														
Po	sitic	on in	org	anis	atio	n																		
Sig	nec	1														Date	DD	/MN	1/Y)	ΥΥ				•
																			-	_		1	7	

#### **Section 9. Enclosures**

Please cross the box to indicate the required enclosures that have been attached (as applicable): Please ensure you have read the Guidance Notes and are clear as to what is required.

Application fee (non-refundable) €500	X
Investigation fee (where applicable)	X
Letter from ICR operator indicating its intention to purchase the gaming equipment submitted in the application	X
Copy of the contract for purchase of the gaming equipment between gaming equipment supplier and the ICR operator, conditional on approval of gaming equipment	X
Compliance test report issued by a gaming test service supplier holding a gaming supplier licence issued by the Commission	X
Documentation (as required in Question 8)	X
Certified copies of approvals/licence for the gaming equipment in other jurisdictions (as required in Questions 9 and 11)	X
Continuation sheets - please indicate number included	X

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.