

**PERSONAL MANAGEMENT LICENCE APPLICATION FORM FOR HORSE OWNER(S)**  
 Under Section 15C(1)(h) and Section 93B of the Gambling Regulatory Authority Act (2007)

Please tick where appropriate\*

<b>Licence Application</b>	
<b>Licence Renewal</b>	

S/N	APPLICANT DETAILS	
<b>1.</b>		
	<b>FOR NATURAL PERSON</b>	
<b>1.1</b>	Title	
<b>1.2</b>	First Name	
<b>1.3</b>	Last Name	
<b>1.4</b>	Passport Number	
<b>1.5</b>	Email Address	
<b>1.6</b>	Mobile Phone	
<b>1.7</b>	Home Phone	
<b>1.8</b>	Gender	
<b>1.9</b>	Nationality	
<b>1.10</b>	Residential Address	
<b>1.11</b>	Occupation	
<b>1.12</b>	Occupational Address	
<b>1.13</b>	Average Monthly Income	
<b>1.14</b>	Source of fund	
<p><b>Please note that all future correspondences will be sent to you to the address mentioned in part 1.10</b></p>		

2. FOR LEGAL PERSON AND PARTNERSHIP		
2.1	Name of Company/Partnership	
2.2	Address of Company/Partnership	
2.3	Contact Person	
2.4	Name	
2.5	Telephone No.	
2.6	Mobile No.	
2.7	Fax No.	
2.8	E-mail Address	
2.9	Source of fund	
3. SYNDICATE DETAILS		
3.1	Syndicate Name	
3.2	Name of the nominee representing the syndicate:	
3.3	Address of the nominee representing the syndicate:	
3.4	Telephone No.	
3.5	Mobile No.	
3.6	E-mail Address	



<b>6B</b>	<b>Have you ever had any civil legal action taken against you personally or as a representative of a body corporate? Yes/No</b> <i>(if yes please fill section 5B.1 and 5B.2)</i>
<b>6B.1</b>	Date:
	Nature of Civil Legal Action:
	Court:
	Outcome:
	Details:
<b>6B.2</b>	Date:
	Nature of Civil Legal Action:
	Court:
	Outcome:
	Details:
<b>6C</b>	<b>Are you subject to any current, pending or previous investigation by any statutory, regulatory or governing body (including Mauritius Revenue Authority, Independent Commission against Corruption, Financial Intelligence Unit, Financial Reporting Council, Registrar of Companies, Registrar of Association, Conservator of Mortgages)? Yes/No</b> <i>(if yes please fill section 5C.1 and 5C.2)</i>
<b>6C.1</b>	Date:
	Subject of Investigation:
	Authority in charge of Investigation:
	Details:
<b>6C.2</b>	Date:
	Subject of Investigation:
	Authority in charge of Investigation:
	Details:

7. FINANCIAL INFORMATION	
<b>Have you ever had any liquidity problem or been declared bankrupt under the Bankruptcy Act or Insolvency Act? Yes/No (if yes please fill section 6.1 and 6.2)</b>	
7.1	Date:
	Details:
7.2	Date:
	Details:

8. DOCUMENTS TO BE PRODUCED (as the case maybe)	
<b>Provide an original and a copy of the following documents to as part of the KYC process</b>	
<b>For Natural Person</b>	
8.1	National ID Card or Valid Passport with clear photographic image;
8.2	Birth Certificate;
8.3	Proof of Address dating not later than 3 months;
8.4	Certificate of Character issued not earlier than 3 months from the date of the application;
8.5	Occupational Permit or Work Permit (for non-resident);
8.6	Bank Reference from a recognized banking institution stating whether the account has been maintained satisfactorily (Bank reference must not be dated more than 6 months old);
8.7	Proof of source of fund, occupation and average monthly income, proof of payment of horse(s) if available;
8.8	Two (2) passport sized photograph
<b>For Legal Person</b>	
8.9	Certificate of Incorporation;

8.10	A list including the names of Beneficial Owners, Shareholders and Directors in the company, as the case may be;
8.11	Certificate of Character issued not later than 3 months from the date of application in respect of the persons referred to at (5.10) above;
8.12	Register of director and shareholders or Annual Return;
8.13	Latest Annual Report;
8.14	Latest audited financial statements or financial statements;
8.15	Certificate from bank showing your company's financial status (Bank Reference).
<b>For Partnership</b>	
8.16	Certificate of Registration/Establishment/Good Standing of the Limited partnership and its General Partner;
8.17	Latest audited financial statements of the Limited Partnership and its General Partner.
<b>For a Syndicate</b>	
8.18	Syndicate Name;
8.19	List of members along with their name, date of birth, occupation, address and a passport-size photograph of each member;
8.20	Certificate of character issued not earlier than 3 months from the date of the application of each member;
8.21	Proof of source of fund, occupation and average monthly income of each member.

**NOTE:**

*\*Applicants should ensure that Application Forms are filled in correctly and with utmost care.*

*\*Incomplete, inadequate or inaccurate filling of the Application Form may entail an application to be turned down by the Horse Racing Committee.*

*\*You Should inform the Horse Racing Division for any change in beneficial owners, shareholders and directors, members or any related information of your company, partnership, and/or syndicate as the case maybe.*

*\*If the applicant is a public listed company, information on shareholders bearing more than 25% of shares will be required.*

*\*The documents required for Natural Person shall be applicable for the Beneficial Owners, Substantial Shareholders and Directors in the company, as the case may be;*

*\* As per Section 2 of the Companies Act 2001 “substantial shareholder” means a person in Mauritius or elsewhere, who holds by himself or his nominee, a share or an interest in a share which entitles him to exercise not less than 5 per cent of the aggregate voting power exercisable at the meeting of shareholders;*

*\*The documents required for Natural Person shall be applicable for the members in a Partnership and syndicate, as the case may be;*

*\*It is an offence to give information which is false or to conceal any relevant information. This may lead to an application being rejected, or, if an application has already been approved, to the revocation of the said licence, and/or may be liable to prosecution.*

9.	<b>UNDERTAKING FROM THE APPLICANT</b>
<p>I, (Name) _____, hereby declare that the information given above is true and correct.</p> <p style="text-align: center;">.....</p> <p style="text-align: center;"><b>Authorised Signature</b> <span style="float: right;"><b>Date</b></span></p>	

10.	<b>FOR OFFICE USE</b>		
<i>Please tick where appropriate</i>		<b>YES</b>	<b>NO</b>
10.1	Approved		
10.2	Additional Comments:		
10.3	Responsible Officer Name:  Responsible Officer Signature:  Date Processed:		

Please forward your completed application with the documents mentioned in part 8 of the application form.

**The Head of Horse Racing Division**  
**Horse Racing Division**  
**Mezzanine Floor, Happy World House,**  
**Sir William Newton Street, Port Louis, Mauritius**  
**Telephone No: (+230) 214 9800**  
**Email: info@hrd.intnet.mu**

*\*Please refer to the regulations governing the Personal Management Licence available on our website <http://hrd.govmu.org/>*