

APPLICATION FORM FOR EQUESTRIAN CENTRE LICENCE

Date:

S/N		
PART A (to be completed by the applicant)		
1	INFORMATION AND CONFIRMATION	
1.1	Registered Name of Equestrian Centre	
1.2	Address/Location of Operation	
1.3	Address of Owner of Equestrian Centre	
1.4	Email Address Telephone No. Mobile No.	
Attach signed annexures if necessary		
<i>*Please tick as appropriate</i>		
1.5	I hereby confirm that my company is duly qualified under Section 93 of the Gambling Regulatory Act 2007 to be holder of a licence.	
1.6	I hereby confirm that no substantial shareholder (within the meaning of Companies Act 2001) of my company is convicted of any offence under the Gambling Regulatory Authority Act or any offence involving fraud or dishonesty or is in breach of regulations made under the Gambling Regulatory Authority Act.	
2	SUBSTANTIAL SHAREHOLDER(S) and/or DIRECTOR(S) INFORMATION <i>(The Substantial shareholder(s) and/or Director(s) information should be provided each two (2) years as from the first document received date)</i>	
2.1	Full Name of Chief Executive Officer	
	Do you hold a current Personal Management Licence? If yes , please give your PML No.	
	Residential Address	
	Contact number	
	Email Address	

2.2	Director Full Name	
	Personal Management Licence No	
	Residential Address	
	Contact number	
	Email Address	
	Occupation <i>(Attach supportive document)</i>	
	Occupational Address	
2.3	Director Full Name	
	Personal Management Licence No	
	Residential Address	
	Contact number	
	Email Address	
	Occupation <i>(Attach supportive document)</i>	
	Occupational Address	

2.4	Shareholder Full Name	
	Personal Management Licence No	
	Residential Address	
	Contact number	
	Email Address	
	Percentage of Shares	
2.5	Shareholder Full Name	
	Personal Management Licence No	
	Residential Address	
	Contact number	
	Email Address	
	Percentage of Shares	
2.6	In case the shareholder is a company/club or partnership, please give details on the company/club/partnership.	
2.7.	List of members or shareholders/partners of the company/club or partnership should be produced.	

3		CONVICTIONS OR INVESTIGATIONS	
<i>(Please tick as appropriate)</i>		YES	NO
3.1	Have you or in the case of a company your directors, managers, officers or any person having direct or indirect interest (Delete as appropriate) ever been convicted of an offence or is subject to any current, pending or previous investigation by any statutory, regulatory or governing body in Mauritius or abroad(including Mauritius Police Force, Mauritius Revenue Authority, Independent Commission against Corruption, Financial Intelligence Unit, Financial Reporting Council, Registrar of Companies, Registrar of Association, Conservator of Mortgages).		
If yes to question 3.1 please provide details:			
4		COMPANY'S LICENCE INFORMATION	
4.1	Current Licence No		
4.2	Licence Expiry Date		
4.3	Period of Renewal	From: / / to / /	
5		PROOF OF OWNERSHIP OF EQUESTRIAN CENTRE	
Please attach details of Ownership of Equestrian Centre			
Please attach Lease Agreement <i>(If Applicable)</i>			

6	DETAILS OF EQUESTRIAN CENTRE CONSTRUCTION & SECURITY
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Equestrian Centre Type	Barn	WIWO	Open Yards	Yard/ Stall
Number of	Boxes	Yards	Paddocks	
Construction of	Roof	Walls	Floor	
Security – Locks applied to	Barn	Tack Room	Feed Room	Property
Security - Other	Dog(s)	Lights	Alarms	Other (Specify below)
Other Security Measures				

EQUESTRIAN CENTRE OWNER/ USER DETAILS	
Name of Equestrian Centre Owner:	
Address of Equestrian Centre:	
Signature of Owner of Equestrian Centre authorizing use of the Equestrian Centre and PROPERTY (Delete PROPERTY if not applicable)	
Signature	
Date	

Names of other Equestrian Centres and property users:

PLAN OF EQUESTRIAN CENTRE *(If insufficient space, attach a separate plan)*

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No. of Thoroughbred	
No. of Ponies	
No. of Staff	

7	APPLICANT INFORMATION
7.1	<p>APPLICANT SIGNATURE AND DECLARATION</p> <p>I,..... (Name)</p> <p>..... (Designation)</p> <p>Acting on behalf of..... (Name of the company, if applicable)</p> <p>I hereby apply for Equestrian Centre Licence mentioned in PART A Section 1 and declare that the information given above and in the attached sheet(s) are true and correct.</p> <p style="text-align: center;">..... Authorised Signature</p> <p style="text-align: center;">..... Date</p>

8	IMPORTANT NOTES:
<p><i>*Please ensure that correct information on beneficial owners, shareholders and directors are adequate. Please use additional shareholder(s) and director(s) information sheet if necessary.</i></p> <p><i>*Any false or misleading information provided, may lead to such disciplinary action deemed appropriate under the Gambling Regulatory Authority Act.</i></p> <p><i>*This 'Application form' should be signed by the applicant or in the case of a company by the duly authorised Director(s).</i></p> <p><i>*You Should inform the Horse Racing Division for any change in beneficial owners, shareholders and directors or any related information of your company as the case maybe.</i></p>	

PART B (to be completed by the Horse Racing Division)	
1	RELEVANT DOCUMENTS SUBMITTED/AVAILABLE:
<i>(Please tick as appropriate)</i>	
MRA Clearance	
Inspection Report (Ref: _____)	

PART C (to be completed by the HRD Cashier Office)	
Processed by:	Title of the Officer:
Signature:	Date: / /

PART D (to be completed by the HRD Licensing Unit)	
Licence Number Issued	
Licence Issued Date	
Licence Validity Period	