

# MPUMALANGA GAMING BOARD



## COMPANY DETAIL FORMS



Signature \_\_\_\_\_

# **COMPANY DETAILS FORM**

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Signature \_\_\_\_\_

**DIRECTIONS FOR COMPLETION**

**Before completing this Form please read the following instructions carefully:**

1. Type or print in BLOCK LETTERS an answer to every question.
2. If a question does not apply to the company state “NOT APPLICABLE” in response to that question.
3. If there is nothing to disclose in reply to a particular question state “NONE” in response to that question.
4. If the space available is insufficient please supply the required information on an attachment page.
5. When required to use an attachment page precede each answer with the title and number applicable to that question.
6. All dates should be completed in the format: Day/Month/Year.
7. This form is to be completed in English.
8. All amounts are to be recorded in South African Rands (Thousands).

**Signature .....**

**Secretary of the Company/Principal Executive Officer \***

*\* Strike out whichever is not applicable*

Signature \_\_\_\_\_

**DIRECTIONS FOR SUBMISSION OF COMPANY DETAILS**

**For the purpose of this Form the term “APPLICANT” means all categories of persons referred to in A,B and C hereunder.**

The Board requires persons falling within the following categories to complete this Form.

- A. The applicant as defined on page iii of the Request for applications;
- B. all persons holding a direct financial interest of 5% or more in the applicant; and
- C. all persons holding a financial interest of 50% or more in the persons listed in B above.



Signature \_\_\_\_\_

**STATEMENT OF TRUTH**

I, THE UNDERSIGNED <sup>1</sup> \_\_\_\_\_

STATE AS FOLLOWS:

1. The contents of this statement as well as the attached company detail form fall within my own personal knowledge
2. <sup>3</sup> I am the <sup>2</sup> \_\_\_\_\_ representing the applicant identified in question 1A of The Company Details of the Mpumalanga Route application form and I have been duly authorised to make this statement on behalf of said applicant.
2. <sup>3</sup> I am the applicant identified in question 1A of The Company Details of the Mpumalanga Route application form, in person.
3. I have personally completed the attached Company Detail form or have supplied all the information upon which the said form was completed.
4. I certify that the particulars contained in the completed Company Detail form are true and correct in every detail and I have fully disclosed the information required to complete said form.
5. I acknowledge that I may be convicted on a charge of perjury, should any part of this declaration be false.

\_\_\_\_\_  
Signature of Deponent

The above statement was duly signed and sworn / affirmed<sup>3</sup> before me at <sup>4</sup> \_\_\_\_\_ on this \_\_\_ day of \_\_\_\_\_ 19\_\_\_\_, the Deponent having declared that he/she<sup>3</sup> knows and understands the contents of this statement, that he/she<sup>3</sup> has no objection to the prescribed oath/affirmation<sup>3</sup> and that he/she<sup>3</sup> regards the oath/affirmation<sup>3</sup> as binding on his/her<sup>3</sup> conscience.

\_\_\_\_\_  
Commissioner of Oaths

Full Names

Street Address

Designation

- 1 Full Name of deponent
- 2 Occupation of deponent
- 3 Delete whichever is not applicable
- 4 Place and Country of declaration , e.g. Johannesburg, South Africa

Signature \_\_\_\_\_



## APPLICANT DETAILS

### NAME OF APPLICANT\*

\*Name as appears on the certificate of incorporation, charter, by-laws, partnership agreement or other official document. **DO NOT ABBREVIATE.**

### TRADE NAME(S)


### COMPANY REGISTRATION NUMBER

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### NATURE OF BUSINESS


### Person to be contacted in reference to these forms:

NAME	
TITLE	TELEPHONE NO. (INCLUDE AREA CODE)

### The principal business address of the applicant:

STREET LOCATION (NUMBER/STREET)	CITY	PROVINCE	POSTAL CODE
COUNTRY		TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)	
MAILING ADDRESS (IF DIFFERENT)	CITY	PROVINCE	POSTAL CODE

### The address from which the applicant is or will be conducting it's main business.

STREET LOCATION (NUMBER/STREET)	CITY	PROVINCE	POSTAL CODE
COUNTRY		TELEPHONE NO. OF THIS LOCATION (INCLUDE AREA CODE)	

Signature \_\_\_\_\_

**ITEM 1. OTHER NAMES AND ADDRESSES OF THE APPLICANT**

A. List all other names under which the applicant has done business, and give approximate time periods during which such names were in use.

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B. State all other addresses currently occupied/held by the applicant and all addresses from which the applicant is currently doing business.

NUMBER AND STREET	CITY	PROVINCE	POSTAL CODE

C. State all addresses, other than those listed above, which the applicant occupied/held or from which it was conducting business during the last ten-year period, and give the approximate time periods during which such addresses were occupied/held.

NUMBER AND STREET	CITY	PROVINCE	POSTAL CODE	FROM	TO

Signature \_\_\_\_\_

**ITEM 2. DESCRIPTION OF APPLICANT**

- A. Specify the business form of this applicant (i.e., corporation, partnership, trust, joint venture, sole proprietorship or otherwise).

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- B. Submit a copy of the certificate of incorporation and all amendments, charter, by-laws, partnership agreement, trust agreement or other basic documentation of the applicant, if any. This document must be labelled as ITEM 2-B.

**ITEM 3. DESCRIPTION OF PRESENT BUSINESS**

As an attachment labeled ITEM 3, describe the business done and intended to be done by the applicant and its parent, holding, subsidiary and intermediary companies and the general development of such business during the past five years, or such shorter period as the corporation or its parent, subsidiary and intermediary companies may have been engaged in business. This description must include information on matters such as the following:

- A. Competitive conditions in the industry or industries involved and the competitive position of the applicant, if known.
- B. The importance to the business and the duration and effect of all material patents, trademarks, licences, franchises and concessions held.
- C. This description must contain a detailed account of the goods or services being provided, or to be provided, to the gaming industry. If your applicant is conducting or intends to conduct both gaming-related and non-gaming related business, differentiate between the gaming-related services and the non-gaming related services.

**ITEM 4. DESCRIPTION OF FORMER BUSINESS**

As an attachment labeled ITEM 4, describe any former business not listed in response to ITEM 3, which the applicant or any holding, intermediary or subsidiary company engaged in during the last ten-year period, and the reasons for the cessation of such business. Also indicate the approximate time period during which each such business was conducted.

Signature \_\_\_\_\_



**ITEM 5. SHARE DESCRIPTION (COMPANY)**

Describe the nature, type, terms, conditions, rights and privileges of all classes of voting, non-voting and other stock issued, or to be issued, by the corporation including the number of shares of each class of stock authorised or to be authorised and the number of shares of each class of stock outstanding (i.e. not held by or on behalf of the issuer) as on this date.

ORDINARY SHARES	PAR VALUE	NUMBER	
		AUTHORISED	ISSUED

PREFERENCE SHARES	PAR VALUE	NUMBER	
		AUTHORISED	ISSUED

OTHER (INCLUDING OPTIONS)		NUMBER	
		AUTHORISED	ISSUED

VOTING RIGHTS

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If the rights of holders of any class of share may be modified other than by a vote, indicate this and explain briefly.

Signature \_\_\_\_\_

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**ITEM 6. NON-VOTING SHAREHOLDERS**

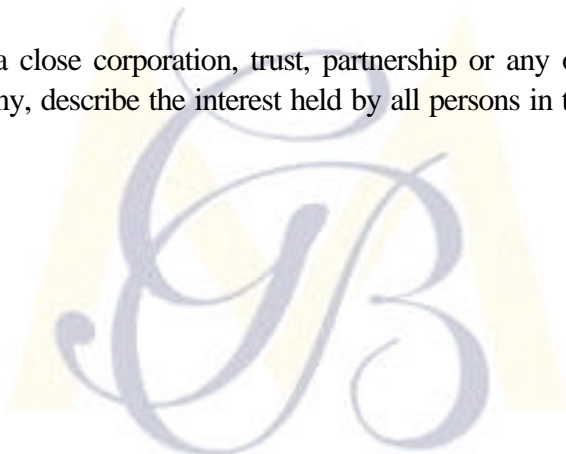
Furnish the information called for in the table below, as to each person or entity holding or having a beneficial interest in any non-voting shares issued by the corporation.

NAME AND ADDRESS	DATE OF BIRTH	CLASS OF NON-VOTING SHARES HELD	NUMBER OF SHARES HELD	PERCENTAGE OF OUTSTANDING VOTING SHARES

\* This information must be provided as on a date no more than sixty (60) days prior to the date of this application.

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 6.

6.A If the applicant is a close corporation, trust, partnership or any other juristic person other than a company, describe the interest held by all persons in the applicant and the percentage thereof.



Signature \_\_\_\_\_

**ITEM 7. QUALIFIERS**

Please indicate all persons or entities in the applicant that correspond to the sub-items listed below. If any of the sub-items (A) to (I) do not apply, please indicate “Does Not Apply” directly on this form.

**NOTE: A PERSONAL HISTORY DISCLOSURE FORM MUST BE COMPLETED BY EVERY PERSON NOTED IN ITEM A THROUGH I BELOW. IN ADDITION, THE BOARD MAY, AT ITS DISCRETION, ORDER ADDITIONAL PERSONS ASSOCIATED WITH THE APPLICANT TO FILE SUCH A FORM IF IT APPEARS THAT SUCH PERSONS SHOULD BE QUALIFIED IN ORDER TO EFFECTUATE THE PURPOSES OF THE ACT, REGULATIONS AND RULES.**

- A. All persons who will act as representatives or otherwise regularly engage in the solicitation of business from a casino, bingo, or site licence holder. \_\_\_\_\_
- B. All persons who have or will sign any agreement with a casino, bingo, gaming machine operator and site licence holder. \_\_\_\_\_
- C. The management employee supervising the regional or local office. \_\_\_\_\_
- D. All officers of the applicant. \_\_\_\_\_
- E. All directors or trustees of the applicant. \_\_\_\_\_
- F. All partners, whether general, limited or otherwise. \_\_\_\_\_
- G. The sole proprietor, if the applicant is a sole proprietorship. \_\_\_\_\_
- H. All beneficial owners of more than five per cent of the outstanding voting shares of the applicant, whether such owners are themselves legal or natural persons. \_\_\_\_\_
- I. All persons doing business with a casino, bingo operator and site licence holder. \_\_\_\_\_



Signature \_\_\_\_\_



Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 7A, & B, etc.



Signature \_\_\_\_\_

**ITEM 8. OUTLINE OF OWNERSHIP**

If ITEM 7 notes **any person** as holding any share, a partnership interest or any other ownership interest in the applicant, prepare a flowchart which illustrates the fully diluted ownership of the applicant as an attachment labeled ITEM 8. If the ultimate holding company is publicly traded and no person controls more than 5% of the publicly traded shares, indicate this fact in a footnote to the flowchart.

**ITEM 9. FORMER OFFICERS AND DIRECTORS**

Furnish the information indicated below for each person not listed in response to item 7, who has held a position as an officer or director of the applicant over the last ten years:

NAME	DATE OF BIRTH	LAST KNOWN ADDRESS	POSITION AND DATES HELD	REASON FOR LEAVING

If reason for leaving, in the above table, was terminated by the company, reasons for such termination must be provided here under.

PERSON	REASON

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 9.

Signature \_\_\_\_\_

**ITEM 10. REMUNERATION OF OFFICERS, DIRECTORS AND PARTNERS**

List the total annual remuneration received during the last calendar year, and the amount to be received during the calendar year subsequent thereto, by each director, trustee, officer and/or partner of the applicant, whether such remuneration is in the form of salary, wages, commissions, fees, share options, bonuses or otherwise.

NAME	POSITION HELD WITH THE APPLICANT	AMOUNT OF REMUNERATION

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 10.



Signature \_\_\_\_\_

**ITEM 11. REMUNERATION OVER R 150 000**

Furnish the information indicated below for each person, other than those listed in response to item 7, who currently receives, or who can be reasonably expected to receive from the applicant, within one calendar year from the date of this form, remuneration as described in item 10 exceeding **R150 000** per annum.

NAME	DATE OF BIRTH	HOME ADDRESS	POSITION AND PERIOD OF TIME WITH THE APPLICANT	AMOUNT OF REMUNERATION

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 11.



Signature \_\_\_\_\_



**ITEM 12. BONUSES, PROFIT SHARING, RETIREMENT, DEFERRED REMUNERATION & SIMILAR PLANS**

As an attachment labeled ITEM 12, describe all existing bonuses, profit sharing, pension, retirement, deferred remuneration and similar plans, or those to be created by the applicant, which description shall include, but not be limited to:

- A. Title or name of the plan;
- B. Identity and address of the trustee of the plan or the person administering such plan;
- C. Material features of the plan;
- D. Methods of financing the plan;
- E. Identity of each class of person who is participating or will participate in the plan;
- F. Approximate number of persons in each class;
- G. Amounts distributed under the plan to each class of persons during the last fiscal year, if the plan was in effect during that time period.

**ITEM 13. INTEREST OF PARTNERS (PARTNERSHIP)**

Describe the interest held by each partner in the partnership, whether general or limited:

- A. Amount of initial investment, whether in the form of cash, negotiable instruments, property or otherwise:

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- B. Amount of any additional contributions made to the partnership:

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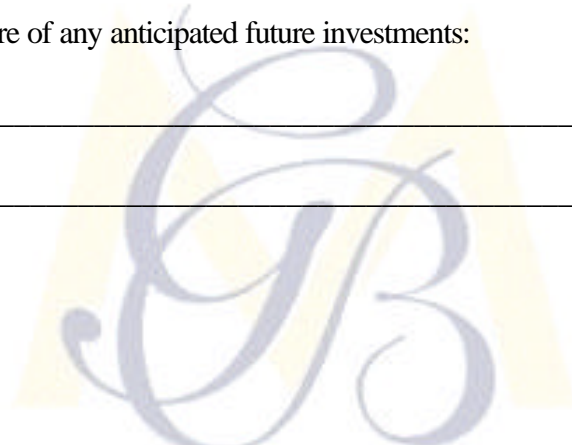
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- C. Amount and nature of any anticipated future investments:

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Signature \_\_\_\_\_



D. Degree of control of each partner over the activities of the partnership:

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E. Percentage of ownership of each partner:

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F. Method of distributing profits to each partner:

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**ITEM 13(i). SHARE OPTIONS\* (COMPANY)**

Describe in detail any options existing or to be created in respect of shares issued by the corporation, which description shall include, but not be limited to, the title and amount of shares subject to option, the year or years during which the options were or will be granted, the conditions under which the options were or will be granted, the consideration for granting the option and the year or years, the terms under which optionees became, or will become, entitled to exercise the options, and when such options expire.

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*\*For the purpose of this application, option shall mean right, warrant or option to subscribe to or purchase any shares issued by the corporation.*

Signature \_\_\_\_\_

**ITEM 13(ii)**

Identify all persons holding the options described in item 13(i) and include the market value of the option at the time of issue.

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**ITEM 14. DESCRIPTION OF LONG-TERM DEBT**

Describe the nature, terms, and conditions of all outstanding bonds, loans, mortgages, trust deeds, notes, debentures or other forms of indebtedness issued or executed (including loans made by shareholders), or to be issued or executed by the applicant, which matures more than one year from the date of issue or which, by their terms, are renewable for a period of more than one year from the date of issue.

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Should you require additional space, attach a separate sheet in the same tabular form and label it ITEM 14.



Signature \_\_\_\_\_

**ITEM 15. HOLDERS OF LONG-TERM DEBT**

Furnish the information indicated in the table below for each person or entity holding any outstanding bonds, loans, mortgages, trust deeds, notes, debentures or other forms of indebtedness executed or issued by the applicant, which mature more than one year from the date of issue or which, by their terms, are renewable for a period of more than one year from the date of issue.

NAME AND ADDRESS	DATE OF BIRTH	TYPE AND CLASS OF DEBT INSTRUMENT HELD	RAND AMOUNT OF DEBT HELD (Both original Amount and Current Balance)

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 15.

**ITEM 16. OTHER INDEBTEDNESS AND SECURITY DEVICES**

Describe the nature, type, terms and conditions of all outstanding loans, mortgages, trust deeds, pledges, lines of credit, or other evidence of indebtedness or security devices utilised by the applicant, other than those described in response to items 14 and 15.

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Furnish the information indicated in the table below in respect of each holder of any outstanding loan, mortgage, trust deed, pledge or other evidence of indebtedness or security device described in response to Item 16.

NAME AND ADDRESS	DATE OF BIRTH	TYPE OF DEBT INSTRUMENT HELD	RAND AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)

Signature \_\_\_\_\_

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 17.

**ITEM 18. FINANCIAL INSTITUTIONS**

Furnish the information indicated in the table below in respect of each bank, savings and loan association or other financial institution, whether domestic or foreign, in which the applicant has or has had an account over the last ten-year period, regardless of whether such account was held in the name of the applicant, a nominee of the applicant or was otherwise under the direct or indirect control of the applicant.

NAME AND ADDRESS	TYPE OF ACCOUNT(S)	ACCOUNT NUMBER	TIME PERIOD ACCOUNT HELD (FROM/TO)

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 18.

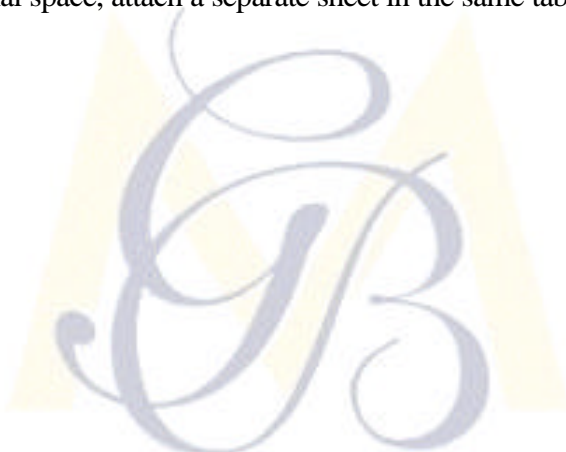
**ITEM 19. CONTRACTS AND SUPPLIERS**

Furnish the information indicated in the table below in respect of all persons with whom the applicant has contracts or agreements valued at R50 000 or more, or from whom the applicant has received R50 000 or more in goods or services in the past six months.

Employment contracts need only be listed if, by their terms, they exceed one year in duration.

NAME	ADDRESS	NATURE OF CONTRACT OR GOODS OR SERVICES SUPPLIED

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 19.



Signature \_\_\_\_\_

**ITEM 20. SHARES HELD BY APPLICANT**

Furnish the information indicated in the table below in respect of each company in which the applicant holds shares ( this should include any other financial interest held by the applicant in a juristic person).

NAME AND ADDRESS OF COMPANY	TYPE OF SHARES HELD	PURCHASE PRICE PER SHARE	NUMBER OF SHARES HELD	PERCENTAGE OF OWNERSHIP MORE THAN 5%

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 20.

**ITEM 21. INSIDER TRANSACTIONS (COMPANY)**

Furnish the information indicated in the table below for each change, within the last five (5) years preceding this application, in the beneficial ownership of the equity shares of the corporation on the part of any person who is indirectly or directly a beneficial owner of more than 5% of any class of an equity shares of the corporation, or who is, or was, a director or official of the corporation within that period. [Include changes resulting from (a) gift, (b) purchase, (c) sale, (d) exercise of an option to purchase, (e) exercise of an option to sell, (f) or any other transaction.]

DATE OF TRANSACTION	NATURE OF TRANSACTION	PARTIES TO TRANSACTION (INCLUDE POSITIONS)	NUMBER OF SECURITIES INVOLVED

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 21.

Signature \_\_\_\_\_

## **ITEM 22. CRIMINAL HISTORY**

The next question requests information about any offence the applicant may have committed, being charged with and/or convicted of. Prior to answering this question, carefully review the definitions and instructions which follow.

### **DEFINITIONS:                      For the purpose of this question:**

- A.     “Charge” includes, but is not limited to, any indictment, complaint, information, summons, or other notice of the alleged commission of any “offence”.
- B.     “Offence” includes, but is not limited to, all felonies, crimes, disorderly persons’ offences, and petty disorderly offenses.

### **INSTRUCTIONS:   1.     Answer “yes” and provide all information to the best of your ability EVEN IF:**

- A.     The applicant did not commit the offence charged;
- B.     the charge was dismissed;
- C.     the applicant was not convicted;
- D.     the charges or offences happened a long time ago;
- E.     the charges are still pending and or have not been finalised in a court of law; and/or
- F.     an appeal against a conviction is pending, but not yet finalised.



Signature \_\_\_\_\_

**“Has the applicant, its owners, officers, directors or any of its subsidiaries ever been indicted, charged with or convicted of a criminal or disorderly person’s offence or been a party or named as an indicted co-conspirator in any criminal proceeding in the Republic of South Africa or any other jurisdiction?”**

YES \_\_\_\_\_ NO \_\_\_\_\_

**If Yes, complete the table below:**

NAME OF CASE AND CASE NUMBER	NATURE OF CHARGE OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (ACQUITTED, CONVICTED, DISMISSED, ETC)	SENTENCE

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 22.

Signature \_\_\_\_\_



**ITEM 23. TRADE REGULATIONS AND SECURITIES JUDGEMENTS**

Has the applicant ever had a judgement, consent, decree or consent order pertaining to a violation or alleged violation of trade regulations or securities laws, or similar laws of any country, entered against it?

YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, provide the information in the following tabular form:

NAME OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGEMENT, DECREE OR ORDER	DATE ENTERED

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 23.

**ITEM 24. INSOLVENCY PROCEEDINGS & APPOINTED RECEIVER, AGENT OR TRUSTEE**

A. Has the applicant, its holding company or any affiliated company had any application or petition under any provision of any insolvency law filed by or against it.

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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B. Has the applicant, its holding company or any affiliated company sought relief under any insolvency law.

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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Signature \_\_\_\_\_

C. \_\_\_\_\_  
 Has any curator, fiscal agent, trustee, recognition trustee, or similar officer been appointed by a court for the business or property of the applicant, holding, affiliate or subsidiary companies?

YES \_\_\_\_\_ NO \_\_\_\_\_

If the response to Item 24C is in the affirmative, complete the table below.

NAME OF PERSON APPOINTED	DATE APPOINTED	COURT	REASON

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 24C.

**ITEM 25 EXISTING LITIGATION**

As an attachment labeled ITEM 25, describe all pending civil litigation, whether by way of action or application, in which the applicant, it's holding company or any subsidiary is currently involved, whether in this province or in another jurisdiction. Do not include any action for monetary damages in which the damages sought, do not exceed R50 000, however, any litigation brought by way of application, should be included. This description shall include the title and case number of the litigation, the name and location of the court where it is pending, the identity of all parties to the litigation, and the general nature of all claims being made.



Signature \_\_\_\_\_

**ITEM 26. LICENCES**

A. Over the last twenty-year period, has the applicant ever had any licence or certificate issued by a government agency in the Republic of South Africa or any other jurisdiction, denied, suspended or revoked?

YES \_\_\_\_\_ NO \_\_\_\_\_

If the response to item 26A is in the affirmative, complete the table below.

TYPE OF LICENCE OR CERTIFICATE	NAME AND LOCATION OF GOVERNMENT AGENCY	ACTION TAKEN	DATE	REASON

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 26A.

B. List all jurisdictions in South Africa and abroad where the company intends to apply for gaming licences.

Jurisdiction	Type of Licence	Date of intended application

C. Has the applicant ever applied, in any jurisdiction, for a licence, permit or other authorisation to participate in lawful gambling operations (including casino gaming, horse racing, dog racing, pari-mutual operation, lottery, sports betting, etc)?

YES \_\_\_\_\_ NO \_\_\_\_\_

If the response to Item 26B is in the affirmative, complete the table below.

NAME AND ADDRESS OF LICENSING AGENCY	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED, PENDING)	TYPE OF GAMBLING ACTIVITY	IF ISSUED, GIVE APPROPRIATE NUMBER AND EXPIRY DATE

Signature \_\_\_\_\_

Should you require additional space, attach a separate sheet in the same tabular format and label it ITEM 26B.

**ITEM 27. CONTRIBUTION AND DISBURSEMENTS OF APPLICANT**

A. Over the last ten-year period, has the applicant, any director, officer, partner, or employee or any third party acting for or on behalf of the applicant offered any bribes or kickbacks to any employee, company or organisation to obtain favourable treatment?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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B. Over the last-ten-year period, has the applicant, any director, officer, partner, or employee or any party acting for or on behalf of the applicant offered any bribes or kickbacks to any government official, domestic or foreign, to obtain favourable treatment?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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C. Over the last ten-year period, have applicant funds been donated or loaned for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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Signature \_\_\_\_\_

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Signature \_\_\_\_\_

D. Over the last ten-year period, has any of the applicants property been donated or loaned for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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E. Over the last ten-year period, has the applicant made/granted any loans, donations or other disbursements to directors, officers, partners, or employees for the purpose of reimbursing such individuals for political contributions, either foreign or domestic?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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F. Over the last ten-year period, has the applicant maintained any bank account or any account in the name of a nominee for the corporation?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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Signature \_\_\_\_\_



G. Over the last ten-year period, has the applicant maintained any numbered account or any account in the name of the corporation?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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H. List the names and addresses of any present or former directors, officers, partners, or employees or third parties who would have knowledge or information concerning the questions affirmatively answered under F and G above.

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PROVIDE DETAILS.

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**ITEM 28. FINANCIAL STATEMENTS**

A. Attach, as an appendix to this form copies of all audited financial statements prepared in the last five years with regard to the applicant and label them ITEM 28A. Include any holding company exception taken to such statements, and management's response thereto.

B. If the applicant does not normally have its financial statements audited, attach as an appendix to this form all unaudited financial statements prepared in the last five years with regard to the applicant. (If the applicant has neither audited nor unaudited financial statements prepared, please note same below this paragraph.) Label it ITEM 28B.

Signature \_\_\_\_\_

**ITEM 29. ANNUAL REPORTS**

Attach, as an appendix to this form, a copy of all annual reports of the applicant which have been submitted to shareholders, partners, or other persons over the last five years.

**ITEM 30. QUARTERLY REPORTS**

Submit, as an appendix to this application, a copy of all quarterly financial statements prepared by or for the applicant, if any, since the last annual report noted in Item 29.

**ITEM 31. INTERIM REPORTS**

Submit, as an appendix to this form, a copy of all reports prepared following the occurrence of any of the following events: Change in control of the applicant, acquisition or disposition of assets, bankruptcy or receivership proceedings, changes in the enterprise's independent auditors, or other material events.

**ITEM 32. REPORTS OF ACCOUNTANTS**

Submit, as an appendix to this form, a copy of all reports and correspondence, other than those previously included in this application, submitted in the last five years, by independent auditors for the applicant, which pertain to the issue of financial statements, managerial advisory services, or internal control recommendations.

**ITEM 33. TAX RETURNS**

Provide, as an appendix to this form, a copy of all Tax Returns for the last five years. Be sure to include all schedules and attachments for these returns.



Signature \_\_\_\_\_



### **ITEM 34. RELEASE AUTHORISATION-NOTICE**

Each applicant must have the attached “Authorisation for examination & release of information”, “Release of all claims” and “Tax return release authorisation” forms properly completed under oath or affirmation.

Each document must be signed by the following person:

- A. If the applicant is a corporation, the president or any officer so authorised to execute such a document and bind the corporation;
- B. If the applicant is a partnership, a partner;
- C. If the applicant is a limited partnership, a general partner;
- D. If the applicant is any other business form, organisation or association, the president or any officer so authorised to execute such a document and bind the applicant;
- E. If the applicant is a sole proprietorship, the natural person who is the proprietor.



Signature \_\_\_\_\_

**MPUMALANGA GAMING BOARD  
PRIVATE BAG X9908  
WHITE RIVER  
1240**

**COMPANY DETAIL FORM**

**(To be completed under oath or affirmation)**

**AUTHORISATION FOR EXAMINATION AND RELEASE OF INFORMATION**

I, the undersigned<sup>1</sup> \_\_\_\_\_, depose and state as follows:

1. I am a <sup>5</sup> \_\_\_\_\_ representing the applicant, being <sup>2</sup> \_\_\_\_\_ and I have been duly authorised to make this statement on behalf of said applicant and bind said applicant accordingly.
  
2. I, hereby authorise the review, full disclosure and release of any and all records (including, but not limited to all records held by any court of law, State, any Government department, Provincial or local government, banks and other financial institutions and statutory boards) concerning said applicant to any duly authorised officer, agent or employee of the Mpumalanga Gaming Board, whether such records are of a public, private or confidential nature, on the following understanding:
  - 2.1 The information reviewed, disclosed, or released may be used by the Mpumalanga Gaming Board to conduct a thorough background investigation regarding said applicant and for any other lawful purpose.
  - 2.2 I release and indemnify the suppliers and users of the records and/or information collected pursuant to this authorisation from any liability whatsoever and further release and indemnify the Mpumalanga Gaming Board, its officer's, agents and employees from any liability which may be incurred as a result of the collection and use such records and/or information.
  
3. If this authorisation is not sufficient to obtain access to certain records, I understand that I may be requested to execute some other appropriate authorisation or release, and that any failure to do so may be taken into consideration by the Mpumalanga Gaming Board when deciding upon the relevant licence application. (Inability to complete an investigation will be grounds for denial of the application.)
  
4. I understand that I may revoke this authorisation in writing at any time, and that the Mpumalanga Gaming Board may take any such revocation of this authorisation into consideration in completing this background investigation.

\_\_\_\_\_  
Signature of Deponent

The above statement was duly signed and sworn / affirmed<sup>3</sup> before me at <sup>4</sup> \_\_\_\_\_ on this \_\_\_ day of \_\_\_\_\_ 19\_\_\_\_, the Deponent having declared that he/she<sup>3</sup> knows and understands the contents of this statement, that he/she<sup>3</sup> has no objection to the prescribed oath/affirmation<sup>3</sup> and that he/she<sup>3</sup> regards the oath/affirmation<sup>3</sup> as binding on his/her<sup>3</sup> conscience.

\_\_\_\_\_  
Commissioner of Oaths

Full Names

Street Address

Signature \_\_\_\_\_

Designation

- 1 Full Name of deponent
- 2 Full Names of Applicant
- 3 Delete whichever is not applicable
- 4 Place and Country of declaration , e.g. Johannesburg, South Africa
5. Occupation of deponent



Signature \_\_\_\_\_

**MPUMALANGA GAMING BOARD  
PRIVATE BAG X9908  
WHITE RIVER  
1240**

**COMPANY DETAIL FORM**

**(To be completed under oath or affirmation)**

**RELEASE OF ALL CLAIMS**

I, the undersigned<sup>1</sup> \_\_\_\_\_, depose and state as follows:

1. I am a <sup>5</sup> \_\_\_\_\_ representing the applicant, being <sup>2</sup> \_\_\_\_\_ and I have been duly authorised to make this statement on behalf of said applicant and bind said applicant accordingly.
  
2. In consideration of the assurance by the Board that no decision on a licenced application will be taken except after a deliberate, intensive and thorough investigation of the applicant for such licence, including but not limited to background, associates, and finances, I, on behalf of the applicant referred to in paragraph 1 above, it's executors, administrators, successors in title and cessionaries, hereby release, indemnify, and forever discharge the Mpumalanga Gaming Board, its members, agents and employees, from any and all liability of any nature whatsoever as well as all manner of actions, causes of action, suits, debts, judgements, executions, claims and demands whatsoever, known or unknown, in law or equity, which said applicant ever had, now has, may have, or claim to have, against any or all of said entities or individuals, arising out of or by reason of the processing or investigation of or other action related to the above mentioned application.
  
3. I execute the above release it voluntarily and with full knowledge of its significance.

\_\_\_\_\_  
Signature of Deponent

The above statement was duly signed and sworn / affirmed<sup>3</sup> before me at <sup>4</sup> \_\_\_\_\_ on this \_\_\_ day of \_\_\_\_\_ 19\_\_\_\_, the Deponent having declared that he/she<sup>3</sup> knows and understands the contents of this statement, that he/she<sup>3</sup> has no objection to the prescribed oath/affirmation<sup>3</sup> and that he/she<sup>3</sup> regards the oath/affirmation<sup>3</sup> as binding on his/her<sup>3</sup> conscience.

\_\_\_\_\_  
Commissioner of Oaths

Full Names

Street Address

Signature \_\_\_\_\_

Designation

- 1 Full Name of deponent
- 2 Full Names of Applicant
- 3 Delete whichever is not applicable
- 4 Place and Country of declaration , e.g. Johannesburg, South Africa
5. Occupation of deponent



Signature \_\_\_\_\_

**MPUMALANGA GAMING BOARD  
PRIVATE BAG X9908  
WHITE RIVER  
1240**

COMPANY HISTORY DETAIL FORM

**(To be completed under oath or affirmation)**

**TAX RETURN RELEASE AUTHORISATION**

I, the undersigned<sup>1</sup> \_\_\_\_\_, depose and state as follows:

1. I am a <sup>5</sup> \_\_\_\_\_ representing the applicant, being <sup>2</sup> \_\_\_\_\_ and I have been duly authorised to make this statement on behalf of said applicant and bind said applicant accordingly.
  
2. I am aware of the confidentiality of income tax returns and that, without this authorisation, the applicant's returns and return information are confidential and are protected by law. The above mentioned applicant hereby waives its right to such confidentiality and authorise the Receiver of Revenue and any other Government Revenue collecting authority to disclose any of the return(s), return information, including audit reports and work papers for the tax year(s) 1985 to the present, and for any future years, to the Mpumalanga Gaming Board. The authorisation is for above applicants' income tax, value added tax and any other form of tax return(s). In accordance with the Mpumalanga Gaming Act 1995( Act No 5 of 1995), the Mpumalanga Gaming Board may enter into a memorandum of understanding with the Receiver of Revenue which can allow the Board to release confidential information contained in the applicants' records to the Receiver of Revenue. Execution of this document acknowledges the right of the Board to disclose any information in its possession pertaining to said applicant, to the Receiver of Revenue.

\_\_\_\_\_  
Signature of Deponent

The above statement was duly signed and sworn / affirmed<sup>3</sup> before me at <sup>4</sup> \_\_\_\_\_ on this \_\_\_ day of \_\_\_\_\_ 19\_\_\_, the Deponent having declared that he/she<sup>3</sup> knows and understands the contents of this statement, that he/she<sup>3</sup> has no objection to the prescribed oath/affirmation<sup>3</sup> and that he/she<sup>3</sup> regards the oath/affirmation<sup>3</sup> as binding on his/her<sup>3</sup> conscience.

\_\_\_\_\_  
Commissioner of Oaths

Full Names

Street Address

Designation

Signature \_\_\_\_\_



- 1 Full Name of deponent
- 2 Full Names of Applicant
- 3 Delete whichever is not applicable
- 4 Place and Country of declaration , e.g. Johannesburg, South Africa
5. Occupation of deponent



Signature \_\_\_\_\_