



# Sale or Supply of Controlled Machines Personal Declaration Form

## Notes to Applicants

The Gambling Supervision Commission (GSC) is the regulator of all gambling activities on the Isle of Man. One of its regulatory objectives is to prevent gambling from being a source of crime or disorder, associated with crime or disorder, or used to support crime.

The purpose of obtaining the information in this application form is to allow the GSC to both fulfil this regulatory objective and consider if the named individual meets the statutory requirements set out in the Gaming (Amendment) Act 1984.

To make that decision, the GSC is implicitly authorised to carry out such enquiries as may reasonably be expected to satisfy itself that these statutory requirements are met. These enquiries may inform the GSC of pending prosecutions, investigations, barring or disqualification by a professional body or industry regulators.

Answer all questions in full and where specific information is requested, provide in full. Failure to do so may result in your application being delayed, and your application being returned.

Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found. Please number, date and sign any additional attached pages to the application form.

### **IMPORTANT NOTE**

Should it be found that any information provided as part of the application process is, without reasonable excuse, misrepresented or falsified, deliberately omitted or otherwise not properly provided, this may provide reason for an application to be rejected or fail altogether, and any subsequent approval that may have been granted may be suspended or revoked.

More information as to how we use and protect your data can be found in our [Privacy Notice](#).

Issued 04/2025

**Name of Applicant Company**

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**Position Held**

Company Director	
Shareholder with more than 10% holding	

**Personal Information**

Family Name (as shown on your ID document)		
Given Forename(s)		
Other names you have been or are known by		
Current residential address		
Length of time at this address		
If you have lived at your current address for less than 5 years, please provide the previous addresses below indicating dates of residence there.		
Date of Birth		
Place and country of birth		
Current Nationality		
Previous or dual nationality held		
Contact email address		
Contact telephone number		
<b>Previous Address 1</b>	<b>Date from</b>	<b>Date to</b>
<b>Previous Address 2</b>	<b>Date from</b>	<b>Date to</b>

**Verification of Identity and Residence**

We are required to verify your identity and your place of residency. Please provide a certified copy of the photograph page of your current valid passport or national ID card and two recent utility bills no more than 3 months old (a bank statement is also acceptable as one of the documents).

## Integrity Assessment - Criminal Convictions

### IMPORTANT NOTICE

Paragraph 3 of Part 3 of Schedule 1 of the Rehabilitation of Offenders Act 2001 (Exceptions) Order 2018 exempts any occupation in respect of which an application to the GSC for a licence, certificate or registration is required. You must therefore disclose spent convictions.

Declaring a conviction should not be seen as an automatic bar to licensing, as all matters are judged individually on their merits. If you answer 'yes' to any question, please provide full details in a separate attachment.

In relation to any global jurisdiction, have you ever:

been convicted of an offence or accepted a formal Police or Customs caution, admonishment or formal warning?	
been charged with an offence and awaiting hearing; or otherwise, subject to a pending prosecution?	
been censured, disciplined or made subject of an order by any Professional Body, Trade Association or Industry Regulator?	
been disqualified from acting as a director of a Company, prohibited from acting in the management or conduct of the affairs of any company, partnership or association?	
had any business involvement or association with a business that formed part of or was in any way involved in a police investigation or an investigation conducted by any other enforcement body?	
been barred from entry into any employment or office or during any employment or office, have you ever been suspended, dismissed or required to resign?	
To your knowledge, are you under investigation or enquiry by: <ul style="list-style-type: none"> <li>• the police, customs or any other law enforcement agency;</li> <li>• any other Government Agency (i.e. Tax, IRS, Social Security etc.); or</li> <li>• any Professional Body, Trade Association or Industry Regulator.</li> </ul>	

## Integrity Assessment - Financial Circumstances

The following questions refer to all jurisdictions and countries and your answers should not be restricted to any one jurisdiction in isolation. You must declare all matters irrespective of how long ago they occurred.

Have you ever been:

declared bankrupt?	
entered into an agreement with creditors?	
subject of an Individual Voluntary Agreement (IVA)?	
subject of any civil legal action (including County Court judgements)?	
subject to penalty or enforcement action by any other Government Agency (Tax, IRS, Social Security etc.)?	
a director or held any other senior appointment with any company, partnership or business entity which has been placed into Liquidation, Receivership, Insolvency or subject to any kind of regulatory administration or monitoring?	
Are you in default or arrears in any of the following?	
Mortgage facility	
Loan agreement	
Credit or Store Cards	
Bank overdraft facility	
Penalty or enforcement action by any Government Agency (e.g. Income Tax)	
Any other type of financial liability	

## Competency Assessment - Professional References

If you are or ever have been a member of a Professional Body, Trade Association or other similar organisation please provide the following information or state N/A if you have not.

Name of Body or Association	
Your Designation	
Date Admitted or Joined	
Membership Number	
Date membership ended	

## Competency Assessment – Previous Gambling Associations

As part of our assessment into your competency to carry out the role, please answer the following questions. You will also be required to provide your personal curriculum vitae.

Have you ever been party to an application to the Isle of Man Government for any type of Gaming, Betting or Gambling Licence?	
If you answer yes, please state which company/s.	
Have you ever been party to an application in any other jurisdiction for any type of Gaming, Betting or Gambling Licence?	
If you answer yes, please state in which jurisdiction/s.	

## Curriculum Vitae

Please provide a separate CV or Résumé which will include details of the following:

- Brief educational history and qualifications obtained;
- Full employment history for the past ten years, including employer's name, job title and responsibilities, the length of the term of employment and the reason for leaving; and
- Experience and qualifications relevant to the role and the gambling industry.

## Check List

Please indicate whether you have provided the following information. If the answer is NO, please explain on a separate sheet of paper. Have you:

answered all questions or provided an alternative explanation?	
provided a certified copy of your evidence of identity?	
provided a certified copy of a document that verifies your address?	
provided a Curriculum Vitae?	
signed and dated the declaration below?	
provided certified copies of your relevant professional qualifications?	

## Declaration and Signature

I certify that information supplied in this application is complete and correct to the best of my knowledge and understand that any material falsification or omission of information could constitute a criminal offence under Section 4 of the Fraud Act 2017.

I will inform the GSC about any other significant information and changes that are relevant and become apparent after submitting the application.

I confirm that I have read and understood:

- The Gaming (Amendment) Act 1984; and
- The Guidance on Integrity Controls.

### IMPORTANT NOTE

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**Signed**

**Name**

**Date**