

Gaming Control (CAP.152) 11

FIRST SCHEDULE (Regulation 5)

Application for Gaming Machine License

Name of applicant: Address of applicant: Telephone Number, fax, e-mail, etc:					
			Name, location of establishment whe	ere gaming machines will be kept:	
Number and type of gaming machine	es to be licensed:				
(Kindly attach any additional gaming	machine information)				
New application:	Renewal:				
Date:	Signature:				

THE SUBSIDIARY LAWS OF BELIZE

REVISED EDITION 2003



Application for Gaming Machine License

Name, location of e	stablishment where gaming machines will be kept:
Name of person:	
(Person responsible	e for the operations of Gaming Machines in the Establishment)
Address of person:	
(Person responsible	e for the operations of Gaming Machines in the Establishment)
Telephone Number	, fax, e-mail, etc:
(Person responsible	e for the operations of Gaming Machines in the Establishment)
No objection by Loc Signature and Stam (i.e. City Council, To	cal Authority open of Local Authority own Board, or Village Council) (Only filled out for new applications)
•	op of District Commanding Police Officer (Only be filled out for new applications)
null and void.	t all the above information is true, or the application will be deemed
Date:	Signature:
Receip Payment can be at the Tre	License License t of Non-Refundable application fee (Only paid for new applications) asury Department in Belize City or Sub-Treasuries countrywide. The details of the payments are as
follows: Purpose of payment: Cost Centre: Item: Program: Activity:	Non-Refundable Gaming Machines application fee (\$1,500.00) 24028 10606 120 15
(Please note that docume	ents such as the application form, fingerprints document, reference letters etc cannot be more

than 6 months old)